

A LEAGUE TABLE OF

CHILD

MALTREATMENT

DEATHS IN RICH

NATIONS

This publication is the fifth in a series of *Innocenti Report Cards*, designed to monitor the performance of the industrialized nations in meeting the needs of their children. Each Report Card presents and analyses league tables ranking the performance of rich nations against critical indicators of child well-being.

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*“The challenge of ending child abuse is
the challenge of breaking the link between
adults’ problems and children’s pain.”*

Key findings

- Almost 3,500 children under the age of 15 die from maltreatment (physical abuse and neglect) every year in the industrialized world. Two children die from abuse and neglect every week in Germany and the United Kingdom, three a week in France, four a week in Japan, and 27 a week in the United States.
- The risk of death by maltreatment is approximately three times greater for the under-ones than for those aged 1 to 4, who in turn face double the risk of those aged 5 to 14.
- A small group of four countries – Spain, Greece, Italy, Ireland and Norway – appear to have an exceptionally low incidence of child maltreatment deaths.
- Five nations – Belgium, the Czech Republic, New Zealand, Hungary, and France – have levels of child maltreatment deaths that are four to six times higher than the average for the leading countries. Three countries – the United States, Mexico, and Portugal – have rates that are between 10 and 15 times higher than the average for the leading countries.
- Inconsistencies of classification and a lack of common definitions and research methodologies mean that little internationally comparable data exist and that the extent of child maltreatment is almost certainly under represented by the statistics.
- Child deaths from maltreatment appear to be in decline in the great majority of countries in the industrialized world.
- The countries with the lowest rates of child death from maltreatment also have very low rates of adult deaths from assault. Similarly, the three nations with exceptionally high levels of child deaths from maltreatment – the United States, Mexico, and Portugal – also have exceptionally high adult death rates.
- Poverty and stress – along with drug and alcohol abuse – appear to be the factors most closely and consistently associated with child abuse and neglect.
- Seven countries – Austria, Denmark, Finland, Germany, Iceland, Norway and Sweden – currently have laws explicitly prohibiting the physical punishment of children.

One small step

The UN Convention on the Rights of the Child is widely regarded as the most specific and progressive human rights treaty ever adopted. Ratified by almost every country in the world, it rejects cultural relativism in favour of universal human rights that transcend cultural, religious, historical and economic differences in order to set a minimum standard of protection and respect to which all children are entitled.

Today, the Convention is more honoured in the breach than in the observance; children continue to be malnourished, to succumb to preventable disease, to be denied even an elementary education; they continue to be exploited, prostituted, raped, and sold; and they continue to be abused in wars and workplaces, in childcare institutions and in homes.

The hope has always been that the Convention would become a common rallying point in all nations, building public and political pressure for change and gradually closing the gap between its ideals and the realities of national law and practice. In this way, it may one day become the accepted standard below which any civilised nation, rich or poor, will be ashamed to fall.

The concluding section of this *Innocenti Report Card* shows this process beginning in one specific area and in a limited number of countries. Again and again over the last decade, the Convention has been cited by non-governmental organisations, parliaments and law courts as a basis for outlawing all forms of physical punishment of children (see pages 23 to 28). The countries that have so far enacted such legislation – Austria, Denmark, Finland, Germany, Iceland, Norway and Sweden – have therefore brought their national laws into alignment with Article 19 of the Convention which requires that children be protected against “*all forms of physical and mental violence ... while in the care of parent(s), legal guardians(s) or any other person who has the care of the child.*”

Some would say their example represents only a minor advance in the protection of children against violence. But it nonetheless represents a significant breakthrough for the wider

international movement now mobilising around this issue. Meeting in its first ever Special Session devoted to the problems facing children in May of 2002, the UN General Assembly summed up that issue in one succinct sentence: “*Societies must end all forms of violence against children.*” And to advance this cause, UN Secretary General Kofi Annan has since appointed Sergio Pinheiro of Brazil to lead an independent world-wide study of violence against children.

Weighed against the scale and severity of the problems that will be investigated by Dr. Pinheiro and his team, the banning of physical punishment in a handful of the world’s richest nations might seem an insignificant, even trivial matter. But this would be to underestimate the effect it has already had and the wider importance of the message it has sent out.

The seven countries that have taken this step have provoked a world-wide debate. They are persuaded, and are persuading others, that legalized violence towards children is a breach of human rights even when it takes place within the home. They are convinced that removing the bottom rungs will make the ladder of serious child abuse more difficult to climb. They are voicing their agreement with the International Committee on the Rights of the Child when it says that “*toleration of violence in one sphere makes it difficult to resist in another.*” And, finally, they are persuaded that physical punishment, far from being a socialising discipline, is a very effective way of teaching bad behaviour – a memorable lesson in the legitimacy of violence as a means of resolving conflicts and asserting will.

Several more countries are close to introducing similar measures. If and when these countries move to bring in the necessary legislation, they will be showing the world that they are taking their obligations under the Convention on the Rights of the Child seriously, and strengthening the message that the goal of ending violence towards children in all its forms can be advanced by every parent in every country and that a culture of non-violence towards children can and should be built from the ground up. ■

Child maltreatment deaths in rich nations

Figure 1a Unrevised league table of child deaths from maltreatment

The table shows the annual number of deaths from maltreatment among children under the age of 15 years averaged over a five year period and expressed per 100,000 children in the age group. Data are for the most recent five year period during the 1990s for which information is available for each country. (Details of the data and calculations are given on page XX.)

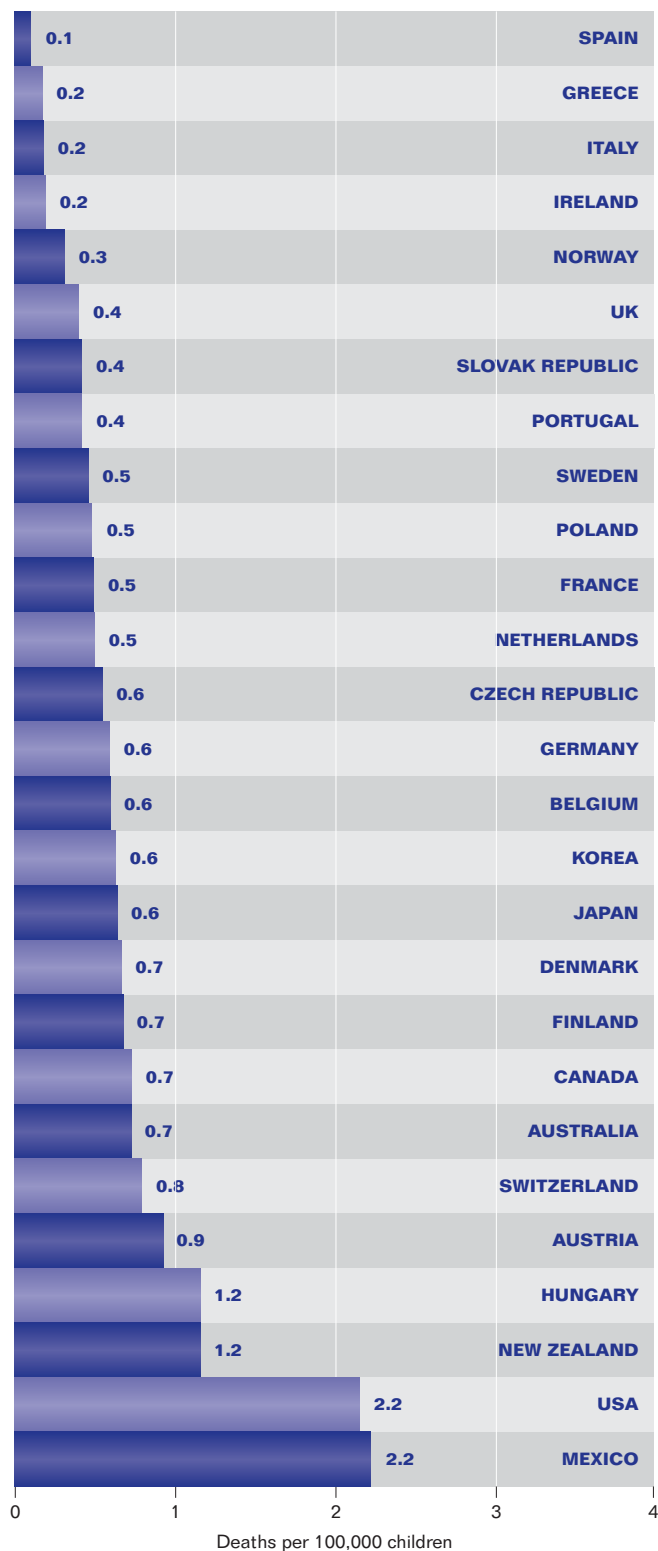
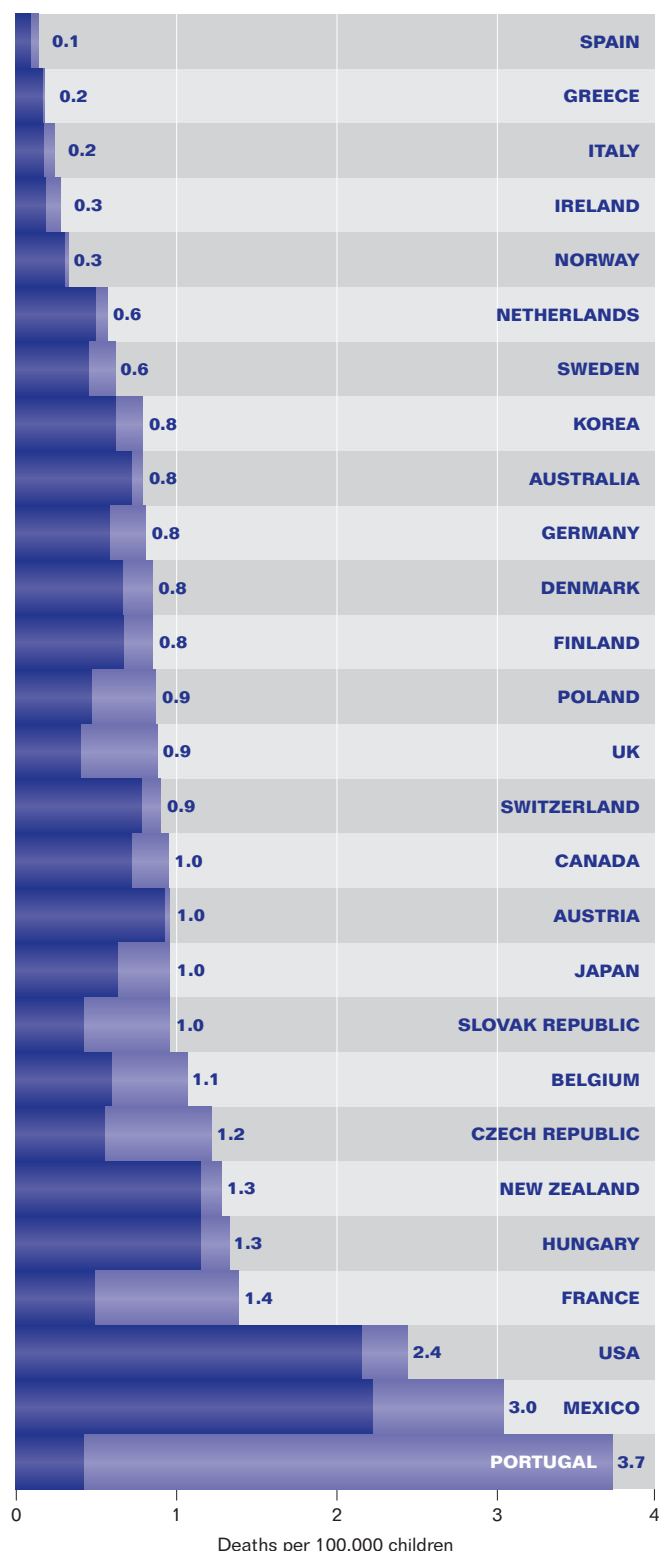


Figure 1b Revised league table of child deaths from maltreatment

The table shows the annual number of deaths from maltreatment (dark part of bar) combined with those classified as 'of undetermined intent' (pale part of bar). The data are for children under the age of 15 years averaged over five years expressed per 100,000 children in the age group. The table gives rounded totals. (Details of the data and calculations are given on page XX.)



Commentary

Part 1: Child deaths from maltreatment

Is the physical abuse of children more common in some industrialized countries than in others? Is it increasing or decreasing? Can it be related to other problems in teenage and adult life? Is the level of child abuse influenced by economic and social changes such as rising incomes, welfare reform, or the increasing participation of women in the workforce? Have some nations succeeded in evolving policies to prevent or reduce the maltreatment of children?

The attempt to answer all such questions is confounded by a stubborn problem. What constitutes child abuse? How can it be defined, measured, and recorded in ways that make it possible to compare one nation with another, or one period of time with another, or to relate the frequency or severity of child abuse to possible cause or consequence?

Figure 1a establishes a bridgehead into the issue by basing itself on the apparently firm statistical ground of child deaths from maltreatment (including both physical abuse and neglect) in each OECD country.

It can immediately be seen that the majority of the industrialized countries are grouped in mid-table with very little

difference in their rates of child maltreatment deaths. At the top is a small group of countries – Spain, Greece, Italy, and Ireland – where the rate appears extremely low (fewer than 0.2 maltreatment deaths for every 100,000 children). Towards the bottom of the table are two countries – Hungary and New Zealand – where deaths from maltreatment are approximately six times higher. And at the very bottom are two more countries – Mexico and the United States – where the rate of child deaths from maltreatment is more than ten times higher.

But as a league table of child abuse, Figure 1a has a number of evident weaknesses. First, it records only extreme cases of maltreatment. Second, deaths from maltreatment are so few that the rankings may be susceptible to slight and possibly random changes in incidence rates; three of the five countries at the top

of the league table, for example, are registering only two or three child maltreatment deaths per year, and in such cases a single incident – perhaps a mentally disturbed parent who kills his or her children – can double the annual total. To damp such volatility, Figure 1a uses a five-year average for each OECD country.

But if such statistical precariousness counsels caution when standing underneath the league table of child deaths constructed in Figure 1a, a look into its foundations suggests even more strongly that a rapid retreat is the only sensible option.

Do we trust the figures?

Maltreatment deaths may seem an unambiguous category on which to base international comparison; but the problem is that it is only the death that is clear and uniform – not the cause, or the

The nations of the OECD

The *Innocenti Report Cards* investigate child well-being in rich nations. The series draws data from the 30 members of the Organisation for Economic Co-operation and Development (OECD), the group of countries that produce two-thirds of the world's goods and services.

The OECD member countries are: Australia, Austria, Belgium, Canada, the Czech Republic, Denmark, Finland, France, Germany, Greece, Hungary, Iceland, Ireland, Italy, Japan, the Republic of Korea, Luxembourg, Mexico, the Netherlands, New Zealand, Norway, Poland, Portugal, the Slovak Republic, Spain, Sweden, Switzerland, Turkey, the United Kingdom of Great Britain and Northern Ireland, and the United States of America.

Measuring maltreatment: the data sources

A variety of different sources and types of data are available to those attempting to study maltreatment of children. However, these data are very varied in quality.

Official statistics

These are data from national administrative records. In cases where a child dies the death is registered and a cause assigned by medical personnel or after a coroner's inquiry. Official mortality data are taken from death certificates, vital statistics registries, medical examiners' reports and coroners' or mortuary reports.

Data on physical maltreatment that results in injury but not death are drawn from child abuse reports to official agencies or from criminal statistics. In those countries where statistics are derived from reports this means that a social worker, doctor, teacher, law enforcement officer, family relative or other interested party has informed the authorities about a suspicion of child maltreatment. The report will be likely to lead to an investigation to ascertain the validity of the suspicion. The process varies from country to country but usually the investigation results in the case being assigned to one of three categories. A case is considered 'substantiated' if the balance of evidence indicates that maltreatment has occurred. A case is 'suspected' if there is not enough evidence to substantiate maltreatment but there nevertheless remains a suspicion that maltreatment has occurred. A case is 'unsubstantiated' if there is sufficient evidence to conclude that the child has not been maltreated.

In other countries the official data are derived instead from criminal

statistics. To appear in such statistics the case of maltreatment must have been substantiated in a court of law and the perpetrator convicted.

Survey data

Survey data are collected through studies that are specifically designed to measure the incidence or prevalence of child maltreatment. Surveys usually involve asking people either about their own experience of maltreatment, or about their behaviour towards children in their care. The majority are based on a retrospective questionnaire in which adults are asked about their experiences as children. The most robust surveys involve a large and representative sample of people. However, many surveys – in particular those using 'group data' – are not representative and are therefore considered less reliable.

Group data derives from surveying small samples of respondents who belong to very specific population groups (for example hospital patients or women in shelters). As such data are not representative, group studies use comparison with 'control groups' to derive estimates and statistical trends.

Comparing different data sources

Whether using official data or survey data the comparison of child maltreatment statistics between and within countries is problematic. Methods for assembling statistics differ from country to country (for example data from countries that base official statistics on reporting cannot be compared to those that base official statistics on criminal records as only a proportion of substantiated cases lead to a

criminal conviction of the perpetrators). Furthermore, there is no standard definition for child maltreatment even within countries. Survey data, although useful, cannot be compared to official statistics as survey data measure the admission of child maltreatment by either victims or perpetrators while official data only include the cases that come to the knowledge of official child welfare bodies.

Not surprisingly therefore, survey data are inclined to produce higher figures for child maltreatment than are established from official statistics. One example from the UK has survey data estimating 389 cases each year of serious physical maltreatment per 100,000 children and 778 cases of moderate physical maltreatment as compared to official data records of 70 reported cases of physical maltreatment per 100,000 children per year.

This *Report Card* uses mortality data that have been drawn from official statistical records and submitted by national governments to the World Health Organisation for inclusion in the WHO Mortality Database based on the 'International Classification of Diseases, Injuries and Causes of Death'. The *Report Card* also uses official statistics for non-fatal physical maltreatment and selected survey data in cases where the *Report Card* team considered the samples to be both representative and of an adequate size to ensure that the data are robust.

Sources: see page x

process by which it is reported, or the rigour with which it is investigated, or the criteria by which it is classified.

In some countries the death of a child may trigger an automatic investigation by a multi-disciplinary child death review team;¹ in others, there may be only a cursory inquiry before the death is assigned to a category marked 'accident' or 'undetermined'. Even within the same nation, procedures may vary considerably; in cities across the United States, for example, the proportion of child deaths that are followed up by autopsy can vary between 13 per cent and 82 per cent.² And even when a child death is closely investigated, the results may be inconclusive and the cause relatively easy to disguise. Did the two year-old fall from a window or was he dropped? Was the new-born baby a victim of sudden infant death syndrome or was she suffocated? Did the month-old baby drown in a moment of inattention or was she held under? Was the broken neck the result of a trip or a push? Was the cerebral trauma caused by a fist or a fall?

Those responsible for deciding such issues, and for completing the paperwork, often find themselves in an unenviable position. Is the suspicion strong enough to justify detonating the dam of silence and releasing the emotional, legal, and bureaucratic deluge of a homicide inquiry? And what if those suspicions are misplaced? Who would want to be responsible for adding a charge of murder or manslaughter to the sufferings of innocent parents who have lost a child?

In time, such complex human dilemmas are reduced to the ticks in boxes that eventually become the statistics. And along the way there is considerable scope for interpretation and therefore variation, not to mention the possibility of simple bureaucratic misclassification; a 1993

study in New Zealand, for example, found that less than one third of child deaths from intentional injury had been correctly classified as death from abuse.³ Similarly, a review of 384 child deaths in the State of Missouri found that over half of child deaths known to have been caused by maltreatment had been incorrectly classified.⁴

The cumulative result of all this is a growing unease about the process, and a growing certainty that child deaths from maltreatment are under-represented by the available statistics.

A revised estimate

All of this leaves the league table presented in Figure 1a in a tottering state. The differences it reveals between most OECD nations are too small, too susceptible to marginal random changes and differences in reporting procedures, to have a great deal of significance.

The revised league table presented in Figure 1b attempts to overcome some of these problems in a novel way. To the national totals of child deaths from maltreatment, it adds all child deaths from 'undetermined causes'.

Clearly, the assumption being made here is that when no other cause or motive can be established the death of a child is most likely to be the result of abuse or neglect that cannot be proven in a court of law.

Such reasoning would not do at all for establishing cause of death in individual cases where high levels of proof are obviously required. But whereas at the individual level the principle of 'innocent until proven guilty' must apply, at the statistical level it seems reasonable to assume the opposite. Confidence in this assumption is boosted by the fact that few practitioners in the field of child protection, medical or social, would

quarrel with the idea that a large proportion of deaths from undetermined causes are in fact deaths from unprovable maltreatment.

More vigorous investigation and more consistent recording of child deaths is needed in all nations. In the meantime, combining child deaths from proven physical abuse and neglect with child deaths from undetermined causes provides a more realistic overview. And a comparison between the two league tables (Figures 1a and 1b) is immediately useful in showing that some OECD countries have more to be concerned about than others.

It can be seen straightaway that national rankings at the very top and bottom of the league table are not radically affected by the addition of deaths from undetermined causes (for the top dozen countries, the average increase is about 25 per cent). But for the Czech Republic, the Slovak Republic, and the United Kingdom, the rate of child deaths from maltreatment more than doubles when deaths from undetermined causes are added in. For France the rate is almost trebled. All of these previously high-ranking countries are thereby brought down into the lower half of the table. More dramatically still, the child maltreatment death rate in Portugal can be seen to be eight times higher when the 'undetermined' category is included – sending Portugal plummeting from eighth place to bottom position below Mexico and the United States.

Despite these changes in the rankings of individual OECD countries, the revised league table of child deaths from maltreatment retains the same basic pattern. A small group of countries heads the league with revised incidence rates of 0.3 or less per 100,000. Approximately half of the OECD countries then follow in a mid-table band with revised rates of

Figure 2
Number of child maltreatment deaths

The table shows the total number of maltreatment deaths among children under the age of 15 and those under the age of one year. The totals are for a five year period and include deaths that have been classified as 'of undetermined intent' as in Figure 1b.

	Children under 15 years	of which under 1 year
AUSTRALIA	156	39
AUSTRIA	66	16
BELGIUM	98	26
CANADA	284	91
CZECH REPUBLIC	105	23
DENMARK	40	8
FINLAND	41	12
FRANCE	765	161
GERMANY	523	148
GREECE	16	3
HUNGARY	113	51
ICELAND	1	1
IRELAND	12	4
ITALY	104	13
JAPAN	916	257
KOREA	414	55
LUXEMBOURG	2	1
MEXICO	4,974	1,006
NETHERLANDS	84	26
NEW ZEALAND	55	19
NORWAY	14	1
POLAND	363	131
PORTUGAL	320	29
SLOVAK REPUBLIC	51	16
SPAIN	44	9
SWEDEN	53	8
SWITZERLAND	56	11
UK	502	143
USA	7,081	1,889
TOTAL	17,253	4,197

0.6 to 1.0 per 100,000. Near the bottom of the league falls a group of five countries – Belgium, the Czech Republic, New Zealand, Hungary, and France – with revised rates of between 1.1 and 1.4 per 100,000. And at the very bottom of the table are three countries – the United States, Mexico and Portugal – with revised rates of 2.4 to 3.7 per 100,000.

Figure 3 Fatality victims by type of maltreatment in USA in 2000

The bars show the percentage of fatality victims by the type of maltreatment causing death. Data are from the USA and are based on official statistics from 25 states involving 708 victims under the age of 18 in the year 2000.

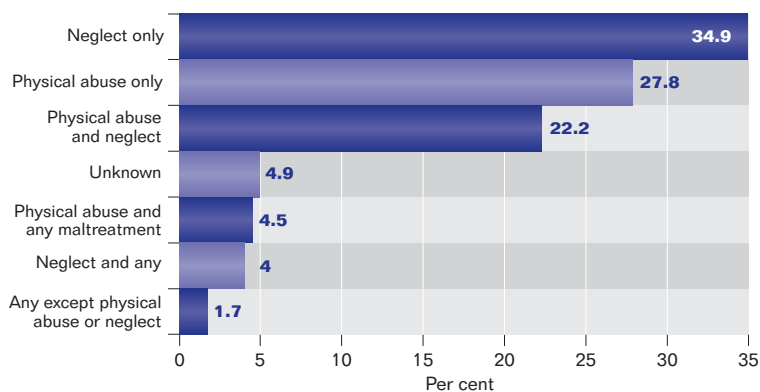
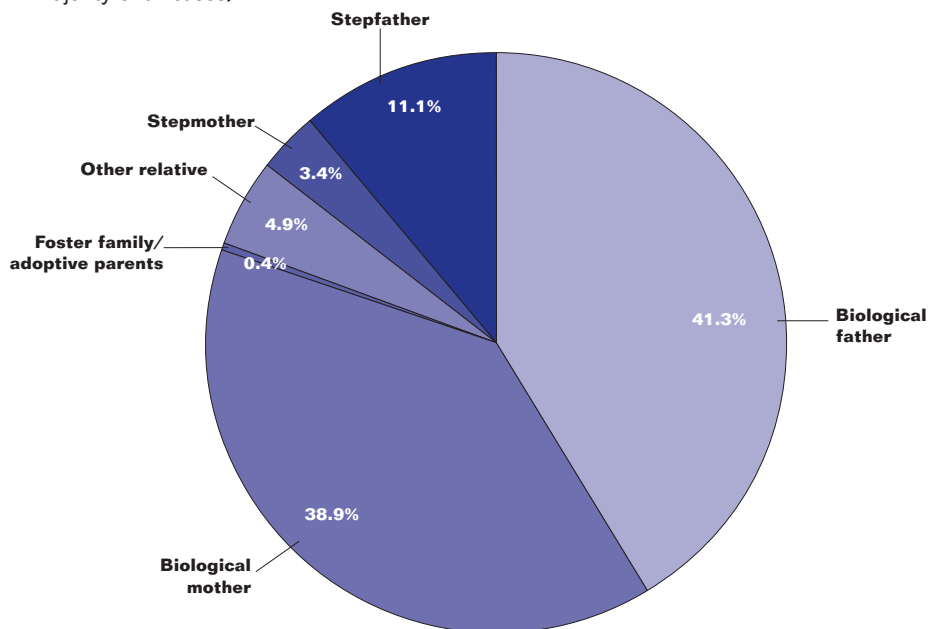


Figure 4 Perpetrators of physical abuse of children

The graph shows the nature of the relationship between the family member who perpetrates physical abuse and the child victim. The data show the percentage of perpetrators and are for substantiated cases of physical abuse in Canada in 1998. Only cases where the perpetrator was a relative are included. (These represent the great majority of all cases).



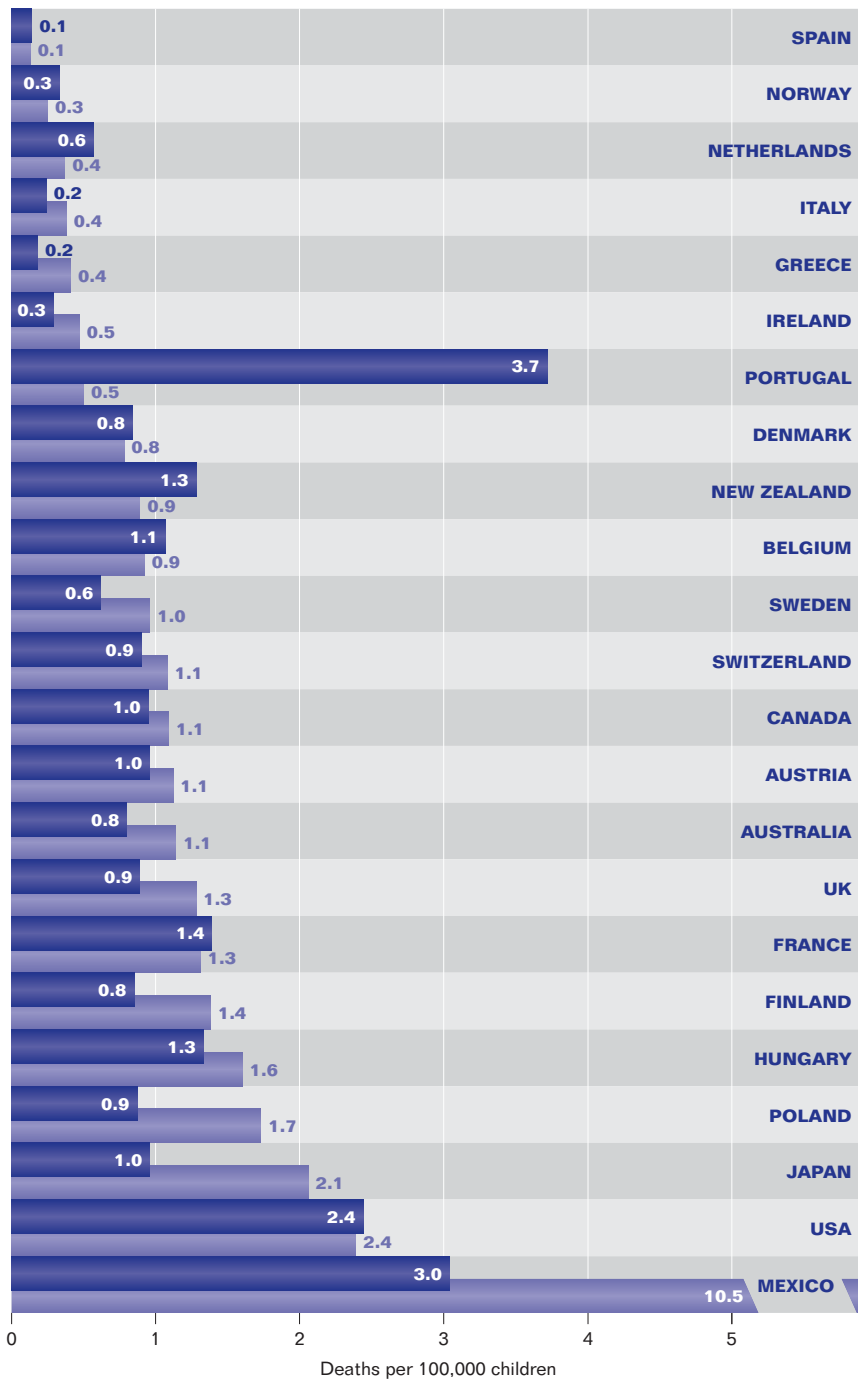
Although an improvement, the revised table also has its flaws. It may, for example, punish countries that are more sensitive to the child abuse issue and more zealous in reporting it (for example those countries in which suspicious child deaths are more carefully investigated and more likely to be classified under 'undetermined cause' as opposed to 'accident').

An OECD overview

Using data from the revised league table, Figure 2 gives the five year totals for child deaths from maltreatment across the industrialized nations. And it delivers the sad news that almost 3,500 children under the age of 15 die each year of physical abuse and neglect (almost 1,000 of them in Mexico). Two children die from maltreatment every week in

Figure 5 Rate of child maltreatment deaths in the 1970s and 1990s

The dark bars show the annual number of deaths from maltreatment averaged over a five year period during the 1990s (as figure 1b) and the pale bars show the rates over the five year period 1971-75 (the basis for the ranking). Rates are expressed per 100,000 children aged under 15 years. The totals include deaths that have been classified as 'of undetermined intent' as in Figure 1b.



Germany and the United Kingdom, three a week in France, almost four a week in Japan, and 27 a week in the United States. Overall, approximately one third of those deaths fall into the category of 'undetermined causes'.

No internationally comparable data yet exist to allow these 3,500 fatalities a year to be broken down into deaths from physical abuse and deaths from neglect. But within individual nations, attempts have been made to assess the relative

importance of the two categories.

Figure 3, for example, shows the results of a recent survey of more than 700 child maltreatment deaths in the United States; approximately one third of those deaths were attributed to neglect, just over one quarter to physical abuse, and about a fifth to a combination of the two.

Nor can the OECD total be broken down according to who is perpetrating the abuse. Even national surveys are relatively uncommon, but Figure 4 presents the results of one Canadian attempt to break down over 7,000 substantiated cases of child abuse by category of carer. And it clearly shows where the bulk of the problem lies: 80 per cent of child abusers are the biological parents. Responsibility appears to be shared about equally between men and women, though given that women tend to spend significantly more time coping with the demands and responsibilities of children it is perhaps surprising that the percentage of abuse committed by men is as high as shown here.

Is child abuse declining?

Turning to the question of change over time, Figure 5 uses the revised table of child maltreatment deaths to show how that rate has changed since the 1970s in the 23 industrialized nations for which data are available. And it reveals that in 14 of those countries the rate of child deaths from maltreatment has fallen, in some cases steeply. In a further four countries the rate has remained stable and in five countries there has been an increase (though in all except Portugal the increase is so small as to be of little statistical significance).

For non-fatal child abuse, a trend is more difficult to establish. Reports and investigations may be rising, but this may reflect a rising level of awareness rather than a rising level of abuse. Indeed many

of the measures taken by governments to benefit and protect children, such as home-visiting by health workers and special programmes targeted towards children from disadvantaged backgrounds, are likely to uncover cases of abuse and neglect which would previously have gone unnoticed (at least until resulting in serious injury or death). Such programmes may also enable earlier intervention and so prevent some of the most severe cases of child abuse. All of this might then surface in statistics showing a decline in the number of cases of serious child abuse at the same time as recording a rise in the number of cases of known maltreatment. This obviously makes it difficult to interpret changes over time in child abuse data. In the United States, for example, the number of reported cases of child abuse and neglect has risen fivefold in 20 years to almost 50 cases per 1,000 children⁵ – indicating either a significant change in levels of abuse or a rise in awareness and reporting, or both.

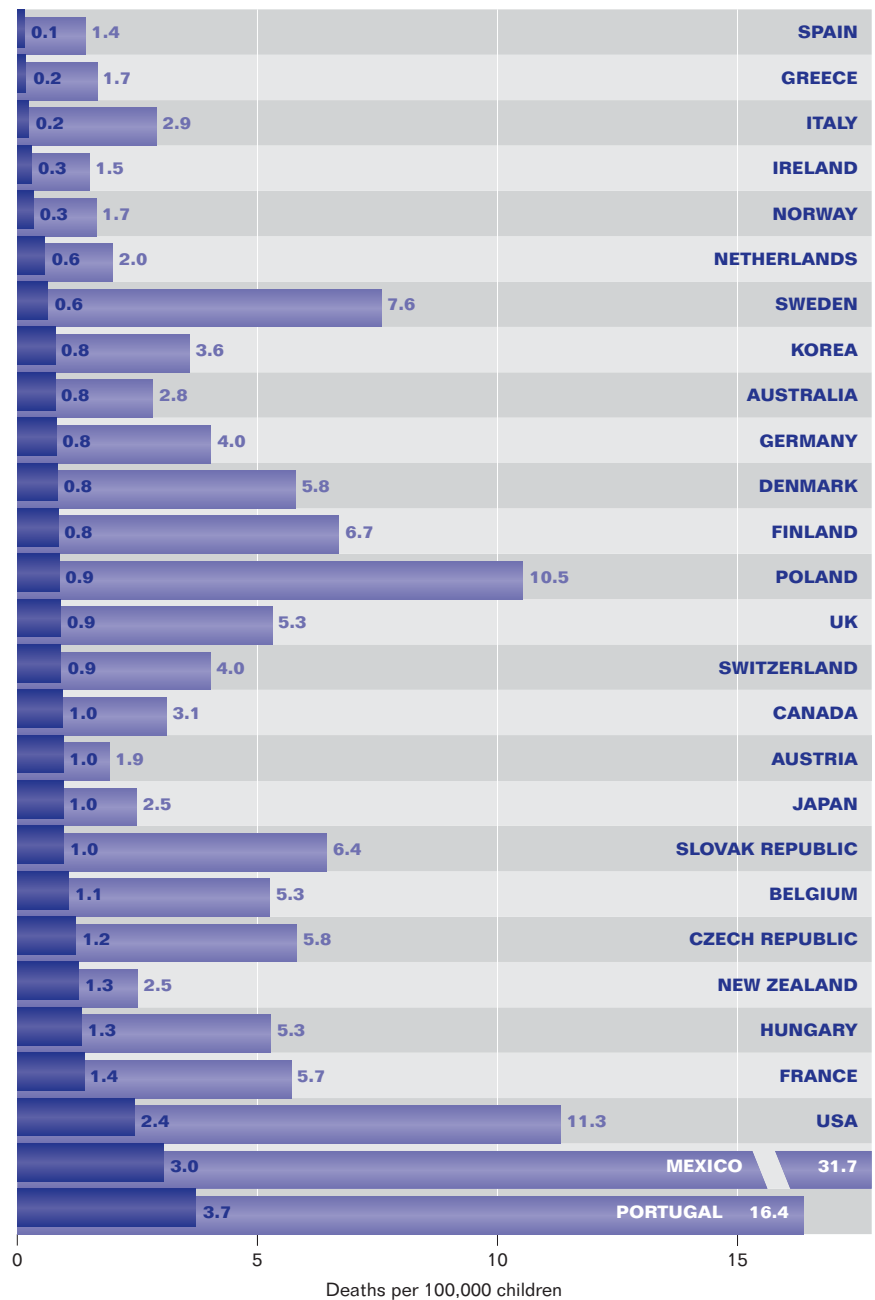
But given that Figure 5 is dealing not with abuse but with actual *deaths* from abuse and neglect (which are unlikely to have gone unreported in either period), and given that the table includes ‘undetermined’ deaths (which to some extent pre-empt the problem of whether deaths have been properly investigated and classified), it is likely that the data present a fairly accurate picture of the change in the level of child deaths from maltreatment over the last two decades. The decline shown is also consistent with the experience of most child welfare practitioners and researchers.

It therefore seems possible to conclude that child deaths from maltreatment are in quite marked decline in the great majority of countries in the industrialized world.

Although it is probable that child *maltreatment* is also in decline, this cannot be deduced from the decline in child

Figure 6 Child versus adult maltreatment deaths

The table shows the annual number of deaths from maltreatment among children aged under 15 years (dark bar) and among people aged 15 years and over (pale bar). The totals for both groups include deaths that have been classified as ‘of undetermined intent’ and are averaged over five years.



deaths. Not only is the relationship between the two a complex one (see below) but there is also a possibility that the decline in deaths could be influenced by advances in emergency and medical services (which obviously have the potential to reduce deaths without reducing maltreatment).

Violence and carelessness

Is the danger of physical abuse and neglect of children related to the level of violence in society as a whole?

Figure 6 uses internationally comparable data to explore this relationship by comparing child deaths from

maltreatment with each OECD country's adult homicide rate.

Overall, it shows that the same small group of countries that have extremely low rates of child death from maltreatment also have very low rates of adult homicide. Similarly at the other end of the table, the three nations with very high levels of child deaths from maltreatment – the United States, Mexico, and Portugal – also have exceptionally high adult homicide rates. In between these two extremes lie the bulk of the industrialized nations, all with fairly low rates of child maltreatment deaths and variable rates of adult homicide.

Figure 7 examines a different relationship – that between child deaths from maltreatment and child deaths from injuries (the subject of an earlier *Report Card* and used here as a possible indicator of a society's overall level of concern for the safety and wellbeing of children). The first column ranks each OECD country by its revised rate of child deaths from maltreatment but divides the 26 countries listed into three colour-coded leagues with pale blue representing the best performers, mid-blue the average performers, and dark blue the worst performers. The second column then presents each country's rate of child deaths from injuries of all kinds, again colour-coded according to performance. In reality, the boundaries between these two categories of child death are less than distinct, and once again there are problems of classification. (Should a death be attributed to its immediate or underlying cause? Is the death of a child from fall or fire or drowning to be assigned to 'neglect', 'accident', or 'undetermined?') But taken together, the two columns in Figure 7 nonetheless suggest a close correspondence between two different measures of the care and protection that societies afford to their

children. And they show again that the record of the Nordic and southern Mediterranean countries (with the exception of Portugal) is markedly better than that of the countries to be found in the lowest category of both tables – the Czech Republic, New Zealand, Hungary, the United States, Mexico, and Portugal.

Youngest at most risk

International official statistics also allow a breakdown by age group of all child deaths from physical abuse and neglect.

The results, presented in Figure 8a, show that infants under one year are in greatest danger of death from maltreatment, with a risk level approximately three times higher than for those aged one to four (who themselves face almost double the risk of five to fourteen year-olds).

Comparison of such age and risk profiles between different OECD nations also shows that the rate of maltreatment deaths for infants tends to vary less than the rate for older children. This may be because the level of risk for infants reflects more the common 'biological' stresses and vulnerabilities of the first year of life than the more diverse social and economic circumstances that condition the risks to older children. Parents of new-borns are everywhere faced with huge and sudden responsibilities for a dependent and demanding human being. Along with the curtailment of previous freedoms, and possible new pressures on relationships and finances, they may also have to contend with feelings of exhaustion, inadequacy, and possibly depression. All of these well-known pressures are coped with and kept in perspective by a majority of new mothers and fathers, but they can prove too much for parents who are ill-prepared, ill-equipped, and unsupported.

The special vulnerability of the child at this age is equally obvious. An infant's

Figure 7
Maltreatment deaths and all injury deaths

The table shows the annual death rates from maltreatment (including 'undetermined') and the rates from all injuries (including those resulting from maltreatment). Deaths are for children under the age of 15 years averaged over a five year period during the 1990s. Rates for all injury deaths are among 1 to 14 year-olds in 1991-95. All rates are expressed per 100,000 children in the age group. Dark blue denotes the worst performing countries, medium blue the average performers and light blue the best.

	Maltreatment	All injuries
SPAIN	0.1	8.1
GREECE	0.2	7.6
ITALY	0.2	6.1
IRELAND	0.3	8.3
NETHERLANDS	0.3	7.6
NORWAY	0.6	6.6
SWEDEN	0.6	5.2
KOREA	0.8	25.6
AUSTRALIA	0.8	9.5
DENMARK	0.8	8.3
GERMANY	0.8	8.1
FINLAND	0.8	8.2
POLAND	0.9	13.4
UK	0.9	6.1
SWITZERLAND	0.9	9.6
CANADA	1.0	9.7
AUSTRIA	1.0	9.3
JAPAN	1.0	8.4
BELGIUM	1.1	9.2
CZECH REPUBLIC	1.2	12.0
HUNGARY	1.3	13.7
NEW ZEALAND	1.3	10.8
FRANCE	1.4	9.1
USA	2.4	14.1
MEXICO	3.0	19.8
PORTUGAL	3.7	17.8

Figure 8a Risk by age

The table shows the number of deaths from maltreatment (including 'undetermined') over five years per 100,000 children throughout the OECD countries as a whole.

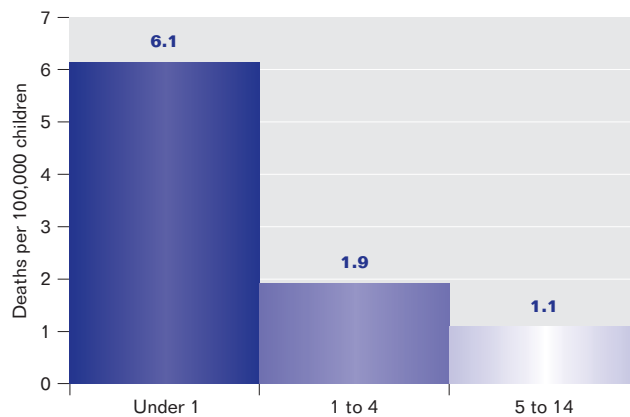
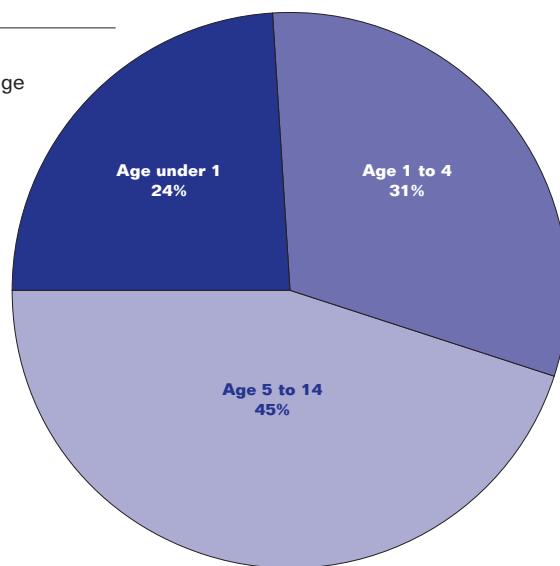


Figure 8b Victims by age

The chart shows the percentage of maltreatment deaths that occur in each of three age groups throughout the OECD countries as a whole. The data are over a five year period and include deaths that are classified as 'of undetermined intent'.



very smallness and immaturity means that he or she can be more easily lifted, dropped, thrown, or shaken, and that little force is required to cause serious or even fatal harm. The relatively large size of the head and weakness of the neck muscles means that cerebral trauma, the main cause of assault deaths for infants, is a particular risk. Sadly, this age-specific vulnerability persists even after injury has occurred; a baby can neither articulate specific hurt nor easily appeal to others for help. Often, also, the abused infant will be solely in the care of those who have caused the injury and who may well delay seeking help either through denial or through fear of exposing themselves to the consequences.

For the majority of families, these stresses and vulnerabilities gradually lessen as

circumstance stabilise, parents mature, and children become more robust, less dependent, and more capable of evading blows, running away from danger, and appealing to others for help. More force is now needed to bring about serious injury or death. It is also likely that truly violent or psychotic parents will already have struck before a child reaches the age of four or five.

But while Figure 8a shows risk declining with age, Figure 8b shows that a certain level of risk nonetheless persists into middle and late childhood and that in absolute terms the majority of child deaths from maltreatment occur in the higher age group five to fourteen. It should also be remembered that these statistics apply only to child deaths from maltreatment, and that the lower

incidence of maltreatment deaths among older age groups may reflect declining vulnerability rather than declining abuse.

For older children, the risk begins to rise again with the onset of adolescence and an increasing participation in the life of the adult world. For some children, this may mean an increasing risk from violence, crime, alcohol, drugs, gangs, and firearms. The pattern of deaths therefore begins to correspond more closely to the pattern of homicide in the population at large.

Before leaving this topic of age-specific risk, it should be pointed out that in the United States, and perhaps in other OECD countries, the transition to a more adult pattern of risk now appears to be occurring at an earlier age.

'Childhood' as the term is used in this Report Card covers the years from birth to 15. But for many American children, and particularly for Black and Hispanic children, the transition to adult patterns of violent death is now beginning not at 15 but at 13.⁶ Indeed so sudden and serious is this trend that the homicide rate for 13 to 17 year-olds is now approximately 50 per cent higher than for the population at large. "Age 13 is clearly the line of demarcation for this phenomenon," writes David Finkelhor. "That is the age at which rates begin to rise dramatically and the age above which the recent historical increase has occurred."⁷

Are deaths a measure of child abuse?

Death has dominated this discussion so far, as it tends to dominate so much of the discussion on child abuse and neglect.

In part this is because the deaths of children at the hands of those who are supposed to be caring for them represents a shocking extreme which compels the attention of press and public. But in part, also, it is because death is a definite,

measurable event – an island of dry data in an ocean of statistical uncertainty. Or as researchers Trocmé and Lindsey put it: *“In response to the paucity of hard outcome data it seems only logical to turn to child homicide rates: one of the only available sources of data that has been systematically collected over an extended period of time.”*⁸

But it is a short step from measuring child deaths by maltreatment to assuming that such deaths are the extreme end of a continuum of abuse and that, as such, they are a guide to the overall level of child maltreatment in a particular society and even to the effectiveness of that society’s child protection services. Are these assumptions valid? Does Figure 1b represent the broad level of child abuse in each OECD nation?

The continuum model, which sees child death from maltreatment as the result of a gradually escalating level of violence and neglect, is widely accepted. But it has not gone unchallenged.

In the United States, for example, a 1990 survey of child deaths from abuse found that in 60 per cent of cases reviewed *“there was no evidence of a pattern of escalating violence”* and that ‘single assault fatalities’ were almost as common as deaths from repeated abuse. Similarly a 1992 survey in the United Kingdom found that there was no evidence of previous abuse in most cases of child homicide. And in Canada, an investigation of child deaths from maltreatment found evidence of previous violence in only 40 per cent of cases.⁹ It is also possible that child deaths from single assault are under-recorded as they may be easier to disguise as accidents than deaths from prolonged maltreatment.

But if a significant percentage of child deaths from maltreatment are not preceded by escalating abuse or neglect, what is their specific context?

Research in individual OECD nations suggests a range of answers, many of them related to parental psychosis or severe mental disturbance.

A review of almost 100 child deaths in Sweden, for example, has shown that more than half involved a mother or father who killed his or her children before committing suicide.¹⁰ Similar investigations in other countries have found that a majority of parents who kill their children are severely mentally disturbed.¹¹

Other studies in Canada, Sweden, the United States, and the United Kingdom have developed this idea to demonstrate that mental illness represents a significant divide between parents who kill children and those who abuse without causing death.¹² In other words, those who kill may represent a special category rather than the extreme of a continuum; for the great majority of parents, even abusive parents, there appears to be a limit, a threshold of abuse and neglect beyond which lie a very much smaller number of very much more severe cases. And it is these few ‘beyond the threshold’ cases, very often associated with mental derangement, that are likely to result in the death of the child. Unfortunately, identifying such cases in advance presents almost insuperable difficulties. And for those who have to make the call, even erring on the side of safety is not an easy option; very often they are caught between the rock of risking children’s safety and the hard place of violating parents’ rights.

Infanticide

With or without psychosis as a factor, there is another sense in which it might be argued that a proportion of child deaths from maltreatment constitute a special case.

Infanticide as a legal term is objected to by some on the grounds that it suggests a

separate and lesser crime than homicide and thereby devalues the life of a child. But as an anthropological term, it describes the killing of a newly-born child by a parent or other family member who does not want the child, or who has a grievance against it, or who is ill-prepared to look after it, or who may be suffering from childbirth-related mental disturbance. This list embraces an untidy gamut of human circumstance – from the jealous boyfriend who believes the child not to be his, to the grandfather who considers that the birth has brought disgrace to the family, to the desperate and depressed teenage mother who feels she has nowhere to turn. Nonetheless infanticide appears to be a category which covers a significant number of infant deaths from maltreatment. And it is a category that appears to be related less to patterns of child abuse in general, or even to the social and economic circumstances commonly associated with physical abuse, and more to the particular circumstances and pressures surrounding birth.

None of these circumstances makes the act of killing a child any the less horrific. Nor do they entirely invalidate the continuum model which sees child deaths from maltreatment as the end result of a gradual escalation ranging from mild to severe physical abuse and neglect. But the evidence does suggest that a significant number of infant maltreatment deaths have their own distinct context and cause and may therefore call for different approaches to protection and prevention.

How big is the abuse iceberg?

This *Report Card* has argued that there are a great many reasons for treating the statistics of maltreatment deaths with special care. First, the combination of very small base numbers with varying national reporting procedures may mean that marginal differences between

countries have little significance. Second, the individual and social circumstances associated with the kind of maltreatment which brings about death, and especially infant death, may not be typical of the circumstances associated with non-fatal abuse or conform to the model of escalating abuse and neglect.

It would therefore be unwise to use the narrow base of child deaths on which to build broad international comparisons or from which to generalise about the vastly larger and potentially much more diverse problem of non-fatal child maltreatment.

In particular, there is a danger that press, politicians and public will become too narrowly focused on child deaths – the measurable and high-profile dimension of the problem – at the expense of wider problems of abuse and neglect that affect the lives of very much larger numbers of children.

Given these limitations of child maltreatment deaths as an indicator, what do we know about the true extent of the wider problem of child maltreatment in the industrialized nations, about its correlates and causes, its costs and its consequences?

Unfortunately there are no accepted definitions or measures of non-fatal child abuse or neglect that would allow accurate comparison between different nations or across different time periods. It is however clear that maltreatment deaths are but the tiny, tragic tip of a very large iceberg of abuse.

As the data from different nations are not comparable, it must again be left to individual national examples to suggest the scale of that iceberg. Substantiated cases of physical child abuse were found by one recent Australian survey, for example, to be 150 times the level of abuse deaths (Figure 9), a ratio rising to

more than 600 to 1 if neglect and sexual and emotional abuse are included. In France, recent data suggest something like 300 substantiated cases of child abuse and neglect for every one death.¹³ In Canada, different definitions have yielded a ratio of more than 1,000 to 1.¹⁴

When it come to reported as opposed to substantiated abuse, the figures are even higher. In the United States, for example, the estimated 1,400 child homicides every year represent less than 0.05 per cent of the 3 million cases of non-fatal child abuse and neglect that were reported to state child protective service agencies in 1996.¹⁵

Unfortunately even these alarming figures do not necessarily reflect the real scale of the issue. For in the ever more murky waters below the known strata of substantiated abuse and reported abuse lies the unseen bulk of abuse cases that are never even reported.

Ultimately, the only way to view the iceberg as a whole, and to monitor changes in its size and shape over time, would be to conduct in-depth interviews with representative samples of parents

and children. If a consistent method and approach to such interviews were to be adopted, then national statistics would become more refined and reliable, and like-with-like international comparisons would become more possible. Such data are needed to inform the debate and guide child protection policies. And their lack demonstrates the low priority so far afforded to this issue by most OECD governments (and in particular by countries such as Turkey which does not feature anywhere in the figures and tables presented in this *Report Card* as it can provide no adequate statistics).

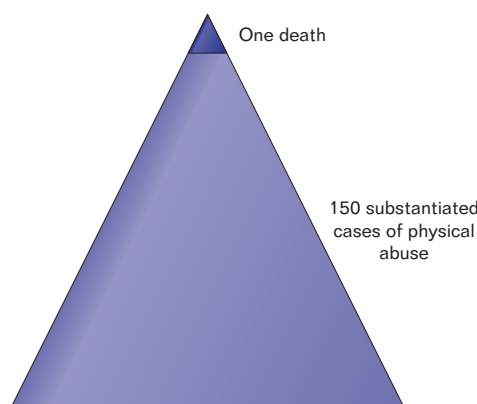
A sample study

Some attempts have been made by individual nations to measure the problem of child abuse in more refined ways and to draw up operational definitions by which it might be measured and graded according to frequency, duration, or severity. But even given such definitions, research faces the obvious and inherent difficulty that interviewees may be unwilling to enter – and must not be insensitively led – into detailed descriptions of painful and humiliating experiences.

One of the most recent attempts to confront these difficulties is a survey by the United Kingdom’s National Society for the Prevention of Cruelty to Children (NSPCC) which looked at a random sample of almost 3,000 young people aged 18 to 24 (interviewing children themselves would of course raise significant ethical problems and it was assumed that young adults would still have clear memories of any abuse in childhood). Overall, the UK research found that seven per cent had suffered serious physical abuse – defined as regular violence causing physical effects lasting until at least the next day. Almost one quarter had suffered less severe physical abuse – defined as treatment at the hands of their families that breached

Figure 9 The physical maltreatment ‘iceberg’

For every one death from maltreatment among children under the age of 15 years in Australia during 1999-2000 there were 150 cases of physical abuse that were substantiated following investigation.



normally acceptable standards (i.e. standards considered acceptable by 90 per cent of the population). High as these figures are, they are still likely to underestimate the scale of the problem both because they cannot entirely overcome victim reluctance to reveal past abuse and because, being reliant on personal recollection, they are unable to reveal violence or maltreatment experienced during early infancy.

Nonetheless, several of the NSPCC's findings are relevant to current international discussion of the abuse issue.

First, it was found that measuring the extent and degree of child abuse using a self-assessment method – allowing each respondent to decide subjectively on whether and to what degree he or she had been maltreated – does not appear to offer a way around the problems of definition and measurement. Of those respondents identified as 'seriously abused' (according to the criteria established by the survey) less than half assessed themselves as having been abused. Of those identified as victims of 'intermediate abuse', fewer than 10 per cent described themselves as abused even though all had received treatment that was described as 'never justified' by almost all survey respondents. (This finding does not appear to be particular to the methods used in the survey. In the United States, a 1994 survey of more than 10,000 adults found that 40 per cent of those who had required medical intervention for maltreatment on two or more occasions did not consider themselves to have been abused.¹⁶)

As the UK example illustrates, the dissonance between subjective and objective assessments of abuse cannot be dismissed as merely reflecting differences in what is considered acceptable by academic researchers and what is

considered acceptable by the public at large. Rather, it seems likely that the discrepancies reflect one of the most central and distressing aspects of child abuse: the fact that the hurt comes from those who are, or are supposed to be, the source of love and care. How is a child to reconcile this most painful of contradictions? Perhaps, it has been suggested, by assuming that abuse is normal, deserved, necessary, and that the fault lies not with the abuser but with the abused. This would help to explain why the prevalence and severity of abuse is judged to be less when subjectively rather than objectively defined. And it may also help to explain why low self-esteem is often the mark that is left on the abused child long after the physical signs have disappeared.

A second aspect of the UK research relevant to the international discussion of child maltreatment is its attempt to measure and grade the kind, degree, and frequency of the abuse. As we shall see later in this *Report Card*, there are arguments for treating all physical violence against children as abuse, but the UK report makes a distinction between punishment and abuse in an attempt to examine whether the escalation of the former into the latter is a common occurrence.

As expected, physical abuse was found to be more likely where physical punishment was more common, but progression from one to the other did not appear to be even or inevitable. As the report says:

“There appeared to be a divide between the families where children were hit with implements or often hit to a level which caused lasting pain, bruising or other injury, and those where occasional slaps occurred which rarely or never had lasting effects. There was no substantial bridging group in which smacking was regular but not severe,

which we would have expected to find if escalation were a common phenomenon. In general it seems that parents either hit children rarely and lightly, or they do it to cause serious hurt.”¹⁷

Quoting research from a generation ago that concluded *“those mothers who smack most frequently also smack hardest,”* the NSPCC report suggests that *“this seems as true today as it was 30 years ago.”* It also concludes that the divide between parents who stop short and those who cross the line into severe abuse may represent *“a qualitative difference between parents able to enter into their child's feelings or distress and those who cannot do so, or whose own anger takes precedence over the child's needs.”¹⁸*

Part 2: Correlates, causes, consequences, costs

This report now turns to what an international review of the data might tell us about some of the possible correlates, causes, and consequences of the physical abuse and neglect of children.

The list of factors most commonly associated with the maltreatment of children includes: class and race, poverty, lone parenthood, unemployment, domestic violence, family breakdown, children not living with biological parents, social isolation, child ill-health or disability, mental ill-health, drug and alcohol abuse, teenage parenthood, low educational levels, and parents having been abused in their own childhood.

As the *Report Card* series has frequently pointed out, the attempt to demonstrate such links is a dangerous necessity. It can deepen understanding of the factors that contribute to the problem of child maltreatment; it can help identify children at higher risk; and it can help to make protection services more effective; but it also needs to carry a statistical health warning.

First, the factors listed above clearly overlap and interact. And to the extent that they have been shown to raise the risk of child maltreatment, they do so by complex pathways. This makes it difficult to know whether, for example, lone parenthood *per se* has an effect on the likelihood of physical abuse, or whether the observed effect is simply the result of the greater economic and other stresses that lone parenthood often entails.

Similarly, while the statistics for the United States may show for example that children in African-American families are

two or three times more likely to die from maltreatment,¹⁹ it seems likely that the operative factor is not ethnicity but poverty (which disproportionately affects ethnic minority families).

Second, guilt by association can unfairly stigmatise and even undermine families who love and care for their children but are characterised as ‘high risk’ because of, say, poverty or lone parenthood. A link has clearly been shown, for example, between abuse in childhood and the likelihood of the victim in turn becoming an abusive parent. But this has tended to enter the public consciousness as ‘abused children grow up to abuse their own children’, whereas in fact two thirds of parents who were abused in childhood do not abuse their own children.²⁰

Lastly, there is also a danger of placing too much emphasis on the association between child abuse and any one factor, or of attempting to build a hierarchy of the social or economic characteristics associated with the maltreatment of children. There is today a broad consensus among child welfare practitioners that the most useful guide to children at risk is not analysis of the relative weights of the different individual risk factors but their *accumulation*.

In the context of these warnings, the following section examines some of the characteristics of individuals and families that have been found to be commonly associated with a higher risk of child maltreatment.

Drugs, violence, and family structure
Of all the family problems recorded by investigators into the circumstances of child maltreatment, one of the most common and most serious is drug and alcohol abuse.

This appears especially true of the United States where more than eight million

children are estimated to live with one or more substance-abusing parent and where one baby in every 20 is exposed before birth to illicit drugs.²¹ These are shocking figures in their own right. But their specific importance for the issue of child abuse has been illustrated by a survey of child welfare professionals in which 80 per cent said that “*substance abuse causes or contributes to at least half of all cases of child maltreatment.*”²² Similarly, 85 per cent of States in the US report that substance abuse is one of the two leading problems (along with poverty) in families reported for child maltreatment.²³ Other researchers have concluded that substance abuse triples the risk for child maltreatment.²⁴

Substance abuse is of course closely associated with poverty, but it also appears to have a strong independent association with abuse. This may be because many substance-abusing parents give priority to acquiring and using drugs or alcohol; or they may have low self esteem, low tolerance levels, and what is chillingly called ‘disinhibition of aggressive impulses’. Other studies have suggested that drug abuse is particularly strongly linked to neglect and emotional maltreatment.²⁵

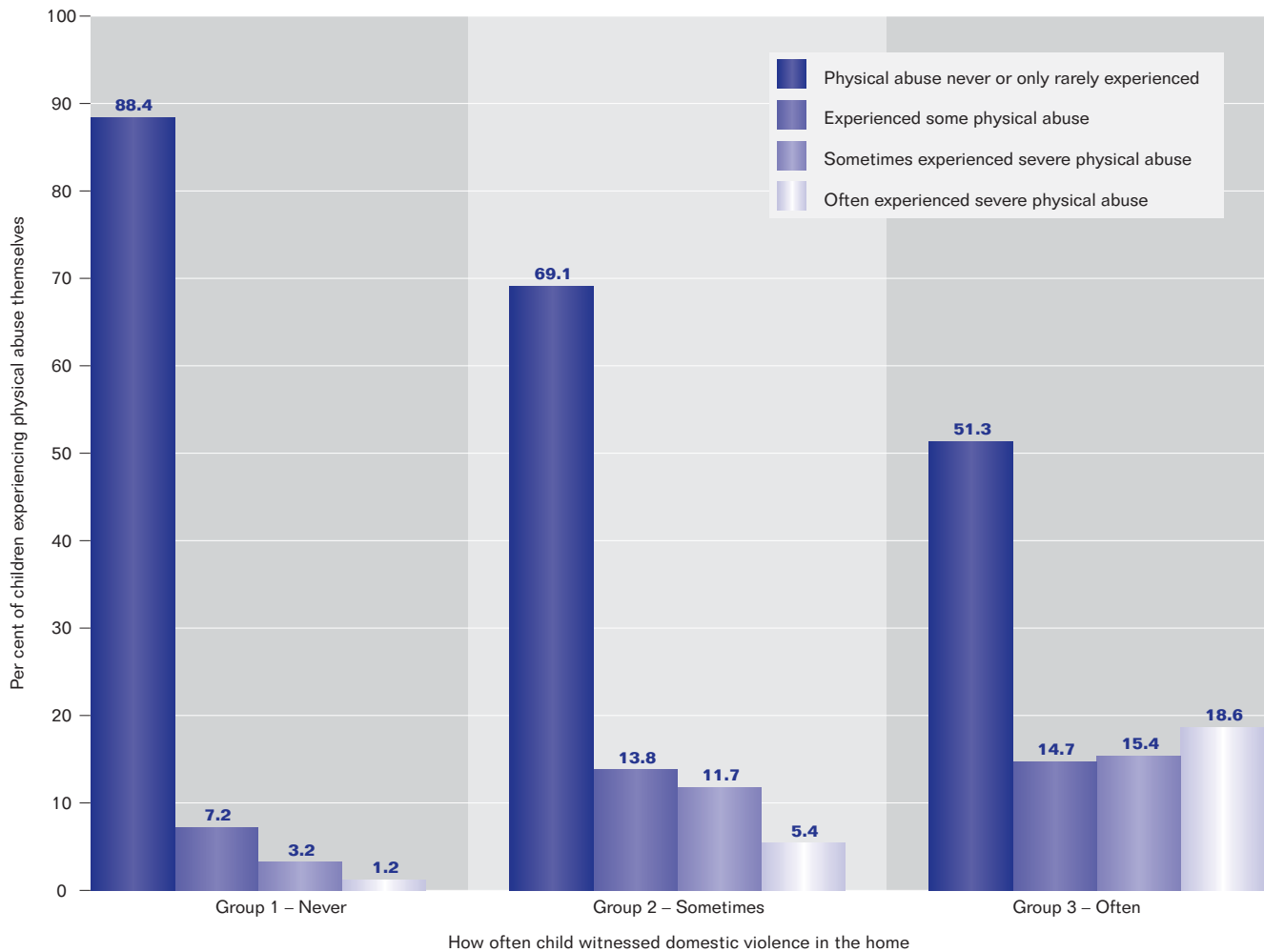
Domestic violence

With or without the fuel of alcohol or drugs, violence between adult members of the same household is also a commonly reported feature of homes in which children are found to have been maltreated.

Figure 10 draws on data from Germany to investigate this relationship by comparing children’s accounts of physical abuse with their accounts of witnessing violence between their parents. It also attempts to differentiate between different levels of abuse and to relate those levels to whether the victims had witnessed adult domestic violence ‘often’,

Figure 10 Domestic violence and physical abuse of children

The table shows the percentage of adolescents who have experienced different degrees of physical abuse in relation to their experience of physical violence between the adults who care for them. The different colours of the bars indicate the extent of the physical abuse experienced by the child. Those in group 1 never witnessed domestic violence, those in group 2 sometimes witnessed domestic violence. Those in group 3 often witnessed domestic violence. The adolescents involved were asked to report incidents of domestic violence witnessed during the 12 month period before the survey was conducted in Germany in 1998.



‘sometimes’, or ‘never’. Overall, the results show that the proportion of children experiencing all three levels of abuse rises with each increase in the frequency of witnessing violence in the home.

It may be said that such data yield the unsurprising conclusion that violence towards children is more common in violent homes. Indeed it would be surprising if adult partners who resort to violence to resolve their own disputes did not also use violence in controlling their children. But the details revealed are of richer interest. Figure 10 shows, for

example, that more than 50 per cent of children who ‘often witness’ violence between adults in the home never or only rarely experience physical abuse themselves. Clearly, some adults who are violent with each other are capable of restraining themselves when it comes to dealing with children. Nonetheless, of those children who ‘often’ witnessed domestic violence, almost one in five also ‘often’ experienced severe forms of physical abuse.

At the other extreme, the chart shows that in homes where there was never any violence between adult partners, only

one child in a hundred ‘often’ experienced severe forms of physical abuse, and only three in a hundred experienced such abuse ‘sometimes’. But it is again cause for concern that over seven per cent of children did suffer some physical abuse even in homes where there was no known violence between parents.

Overall, surveys to date in different industrialized countries suggest that 40 per cent to 70 per cent of men who use physical violence against their partners also physically abuse their children; that about half of women who are physically

abused by their partners also abuse their children;²⁶ that in 30 per cent to 60 per cent of homes where either women or children are physically abused, both forms of abuse co-exist;²⁷ and that the greater the frequency and severity of violence between partners, the greater the risk to the child.²⁸

Figures 11a and 11b again draw on recent data from three individual countries, Australia, Canada, and the United States, to investigate another possible correlate of child abuse – family structure.

The results are strikingly similar for all three – with the risks to the child being almost doubled if the child is growing up with only one parent (whether male or female).

As already noted, particular care must be taken in interpreting and communicating such findings in order to avoid unfairly stigmatising caring and successful single parents. First, the three surveys drawn upon for Figures 11a and 11b identify not the perpetrators of the abuse but the home circumstances of the victim. The person responsible for the maltreatment of a child in a single parent household is therefore not necessarily the single parent himself or herself. Second, it seems likely that the strength of the association between single parenthood and the likelihood of child maltreatment resides not in the fact of single parenthood but in the combination of low income, stress, and social isolation which frequently accompany single parent status.²⁹

It is therefore time to turn to the fact that so many of the factors that have been linked with the physical abuse and neglect of children are closely associated with economic circumstance.

Poverty and stress

Figure 12, based on a 1993 survey in the United States, shows that maltreatment of

Figure 11a Family type and physical maltreatment

The table shows the number of children who have suffered demonstrable harm as a result of physical maltreatment according to whether they are living in two parent families, single parent families or living without either parent. Data are from the USA in 1993 and are expressed per 1,000 children. The word 'parent' indicates either biological parents or adoptive or step parents. The data do not identify the person perpetrating the maltreatment but the home circumstances of the child victim.

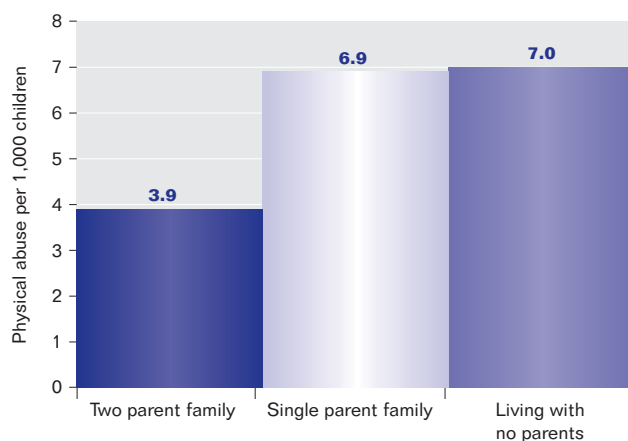
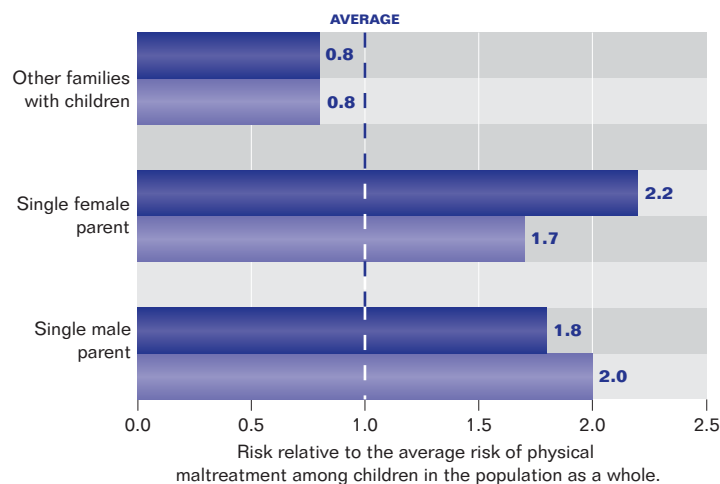


Figure 11b Family type and physical maltreatment

The table shows the risk of a child experiencing physical abuse when living in a single female parent household, a single male parent household or in any other family structure. The risk is expressed as being relative to the average risk of physical maltreatment among children in the population as a whole. The data refer to substantiated cases of maltreatment in Canada in 1998 (dark bars) and Australia in 1995/6 (pale bars). The data do not identify the person perpetrating the maltreatment but the home circumstances of the child victim.

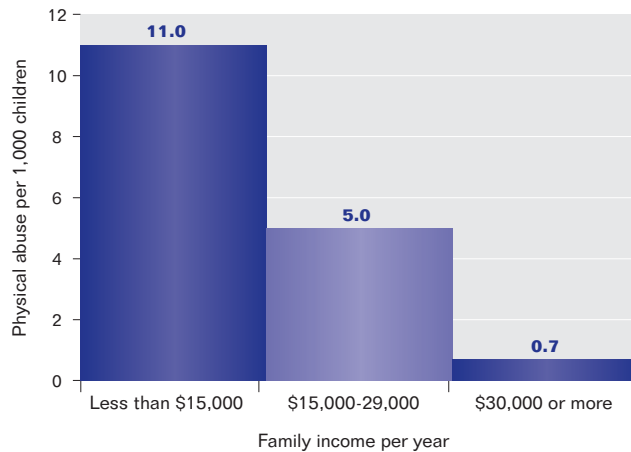


children tends to decrease as incomes rise, with the children of families earning less than \$15,000 a year being approximately twice as likely to be physically abused as children in families with incomes between \$15,000 and \$29,000. In Sweden also, a recent government report has concluded that “A weak family economy stands out as the

background factor most closely associated with child abuse, sexual abuse, and bullying. The worse the family economy, the greater the risk of abuse.”³⁰ Of course it may also be that the poorer the family the greater the contact with state health and welfare services and the greater the likelihood of child abuse being uncovered.

Figure 12 Family income and physical maltreatment

The table shows the number of children who have suffered demonstrable harm as a result of physical maltreatment by a parent or parent substitute. Data are expressed per 1,000 children living in families in each income bracket. Data are from the USA in 1993.



Exactly how and by what means poverty influences levels of child maltreatment is a more complex issue in which the different forces involved overlap and interact. Unemployment or single parenthood, for example, may be shown to be linked to higher levels of child maltreatment, but this finding does not illuminate how the link actually works. Does unemployment have an effect on child maltreatment that is independent of, and in addition to, the effect of increased poverty? Is the link between lone parenthood and child abuse caused by the fact that lone parents tend to be poorer, or by the fact that bringing up a child alone tends to be more stressful? Or is it both?

What seems clear is that physical abuse and neglect are very closely associated with stress. And although this may be saying very little – parents who abuse children are likely to be stressed – it at least offers a single viewing point from which to survey all or most of the factors that appear, in some degree, to be associated with the problem.

A large Canadian survey conducted in late 1998 attributed at least one stress factor to two thirds of the 7,672 abuse

cases investigated. In all, approximately 25 per cent were associated with lack of social support and a similar proportion was linked to a parent or carer with a history of abuse in his or her own childhood. Approximately 20 per cent were associated with substance abuse, and 20 per cent with mental health problems. Other studies and commentaries have attempted to further analyse the relationship between stress and abuse by suggesting that child maltreatment may rise as parental sense of control declines and the feeling of not being able to cope increases.³¹

But from the point of view of the child it is important to bear in mind that the many factors that may be associated in some degree with child abuse add up to a long, painful, and cumulative list of disadvantages. A child who suffers maltreatment that is associated with poverty has the poverty to suffer as well as the maltreatment. A child with a depressed or addicted parent will suffer pain and anxiety and disadvantage that may not only include but go well beyond the kind of maltreatment discussed in this report. A child who suffers physical abuse because his or her parents frequently resort to violence in their dealings with

each other will grow up with disadvantages that go deeper than bruises.

Preventing abuse

Apart from the immediate pain and any long-term physical damage, the maltreatment of children can also impair the ability to thrive and develop normally. It can undermine the ability to learn, to communicate, to form attachments, and to interact normally with others. It can cause anxiety, depression, aggression, and a lowered sense of self-worth. Unsurprisingly, it can and often does result in severe psychological damage and behavioural problems. Further possible long-term effects include a greater tendency to physical inactivity, to cigarette smoking, alcoholism, drug abuse, risky sexual behaviour, and suicide. As Neil Guterman, one of America's leading researchers into the consequences of child abuse and neglect, has written:

*"We not only face a moral imperative to work to end this all-too-common form of victimization and deprivation of our youngest citizens. We also face a societal imperative, confronting us with the reality that child abuse and neglect, particularly experienced early in life, form the taproot of some of the most destructive and costly social problems of our day, including substance and alcohol abuse, problematic school performance, juvenile delinquency and crime, later-life depression, and domestic violence."*³²

Various attempts have been made to calculate the direct and indirect financial cost of all this to society at large, with the bills for industrialized countries amounting to many billions of dollars a year in lost potential and earnings, reduced returns on educational investments, remedial and special school facilities, costs to health services (including mental health services), social welfare and children's agency services

The USA: Colorado counts the cost

The burden of child abuse falls first and foremost on the abused child. But there are also costs to society. And although impossible to itemise in detail, the bill includes:

- Medical costs for treatment of injuries, long-term disabilities, and psychiatric disorders.
- Social services costs for the investigation and monitoring of child abuse, family and child care programmes, child care institutions, help-lines, programmes for children who leave home to live on the streets, and subsidised fostering and adoption programmes.
- Legal costs for police and court time, prison services, probation and parole boards.

In addition, the strong association between child abuse and a variety of later-life problems means that society also incurs significant long term costs arising from higher rates of educational failure, unemployment, substance abuse, teenage pregnancy, crime and violence. All of these are associated in some degree with child abuse, and all lead to significant costs through welfare payments, reduced tax revenues, lost educational investments, and the many consequences of social alienation and crime.

Putting a dollar figure on the bill is extremely difficult. But the attempt has been made by researchers at the State University of Colorado.

Commissioned by a children's charity, the study concludes that the *direct* costs of child maltreatment in Colorado – including welfare services,

out-of-home placement schemes, and other services provided by the Colorado Children's Welfare Department – amount to approximately \$190 million a year.

Indirect costs (those attributable to the "known long-term consequences of child abuse") were calculated at a further \$212 million per year, including a share of the cost of income-maintenance payments, substance abuse programmes, and medical, prison and police costs.

The researchers went on to calculate that the cost of an extended home visiting and family support programme (of a kind shown to be effective in reducing child maltreatment among 'high risk' families) would amount to an extra \$24 million a year. This sum is less than 1 per cent of the annual budget of the State of Colorado, and less than half of the amount spent on foster-care programmes alone.

Arguing that such prevention programmes could pay for themselves many times over, the Colorado Children's Trust believes that this kind of 'cost of failure analysis' is necessary to strengthen the case that "money spent on the prevention of society's problems results in documentable savings over the short and long term."

"If we are able to reduce child maltreatment related expenditures by only 6 per cent," concludes the report, "the cost of the prevention initiative would be offset."

Source: see page x

costs, legal and criminal justice bills, not to mention the costs of taking threatened or abused children into institutional care (Box 2).

But amid all this it needs to be re-stated that the real bill is presented to the child – a bill that is paid in pain and humiliation and bewilderment, in mental and emotional turmoil and distortion, in the impairment of the joy and purpose of childhood itself.

What, then, can be done to prevent or reduce the maltreatment of children with its immeasurable immediate suffering and its long train of personal tragedy and social consequence?

Commentary on different national strategies for preventing child maltreatment is beyond the scope of this *Report Card*. But there is clear evidence of a rising level of concern and debate on the issue across the industrialized world – evidence that includes the appointment of children's ombudspersons in several OECD countries, the setting up of child help-lines, the growing sophistication and integration of home visiting services, the increase in media coverage, and the closer monitoring of children considered at risk. Specific instances of that rising governmental and intergovernmental concern include the campaign to combat all forms of violence recently launched by the Council of Europe,³³ and the regular reports on child protection measures now being provided by most industrialized countries to the United Nations Committee on the Rights of the Child.

An international review of this experience suggests three overarching points likely to be relevant to national efforts.

First, in all countries the problem of child abuse and neglect needs to be brought out from the shadows of national life and into the ordinary daylight of public

attention. This is not at all the same thing as floodlighting a particular case for a few days. Press, politicians and public are willing to agonise briefly over such individual cases, but less willing to confront the broader, more everyday problem of non-fatal child abuse and neglect. In certain industrialized nations today, as many as one child in every fifteen is the victim of serious maltreatment. That is the problem, with huge consequences for children and for their societies, that is consistently left behind in the darkness when the media spotlight moves on.

Second, further developing the strategy of home visits appears to be the best and most immediately practical method of bringing about a significant reduction in child abuse and neglect. A majority of OECD countries now operate home-visiting services that reach out to every family with young children – advising parents, monitoring child development, providing families and health services with early warning of any problems, and linking families with special needs with other government and voluntary services. In recent years a great deal has been learnt about improving the effectiveness of such services. And perhaps the most important lesson is that it is not the fact of home visiting services but the quality of staff, training, and approach that can make a difference to the lives of children and their families. There is likely to be a decisive difference in effectiveness, for example, between health visitors who see their role as one of instruction and surveillance and those who approach the task in the spirit of valuing the parents' skills and enabling parents to cope even more successfully.

Confronting the possibility of child abuse is a small part of the work of most health visitors. Nonetheless, one of the important advantages of such services is that they can help to prevent the

conditions in which child abuse is likely to arise, and also to identify at the earliest possible time those children who are either being abused or are thought to be at serious risk.³⁴ But home visiting services have been found to be far less effective when they attempt the narrower task of targeting only those families where child maltreatment is suspected. Not only are such interventions likely to be too late, they are also likely to find it difficult to avoid hostility, resentment and denial as families feel themselves accused and stigmatised. Home-visiting therefore works best when it is extended to all families with young children, when it is embedded within regular health and social services, and when it makes first contact with the family in the first few days or weeks of a child's life. In this way all families can be supported and resources can eventually be targeted, with less risk of confrontation, lack of co-operation, or stigma, to those families who might otherwise begin the descent into the kind of problems which are the favoured breeding grounds of child abuse and neglect.

Across most of the United States home visiting strategies are, according to one author, *"the brightest star on the child maltreatment prevention horizon."*³⁵ Across most of Europe, with national health and social services to act as an institutional base, that star is considerably closer. Most nations of the European Union have well-established home-visiting systems, linked to comprehensive health and social service systems, which reach out to all or most families with new-born or very young children – one of several possible factors that might help to explain why the average rate of child deaths from maltreatment in the European Union is running at about one third the level of the United States.

Third, and more broadly still, experience would suggest that no national strategy

to prevent or reduce the maltreatment of children will achieve major gains without addressing the question of economic poverty which, as we have seen, is the close companion of physical abuse and neglect. This is not the place to discuss national anti-poverty strategies (the proportion of children living in absolute and relative poverty in the industrialized nations was the subject of the first *Innocenti Report Card*). But in the difficult recent climate of increasing poverty and inequality in the United States, Leroy Pelton has put the case bravely and well:

*"There is overwhelming and remarkably consistent evidence ... that poverty and low income are strongly related to child abuse and neglect and to the severity of child maltreatment ... Approximately 40 to 50 per cent of all child abuse and neglect incidents occur within the less than 15 per cent of all U.S. families with children who live below the poverty level ... Perhaps an "empowered" and superiorly competent person can ward off poverty, its deficits and/or stresses that can arise therefrom. But the environment is real, not just a matter of perception, and can overwhelm people ... In short, we must address the poverty conditions that leave children abused, neglected, or otherwise harmed in the short run if we are to increase individual competencies and inner resources in the long run."*³⁶

A culture of non-violence

Even if all of these significant levers of child abuse prevention were to be used, there are many who work in the field of child protection who believe that more fundamental action is needed. It is unlikely, they would argue, that poverty and stress will disappear in the immediate future. And the challenge of ending child abuse, therefore, is the challenge of breaking the link between adults' problems and children's pain. It ought not to be part of family culture, or of our societies' culture, for the psychological, social or economic stresses of adults to be

vented on children, or for problems and frustrations to be so easily translated into abuse of the defenceless. The task is therefore one of creating a culture of non-violence towards children, of building a barrier of social and individual conscience which says that it is totally unacceptable in any circumstances for adults to express either their will or their frustrations in the language of violence towards the young.

Over recent decades, it has been the Nordic countries that have taken the lead in promoting such a culture of non-violence. And though this has involved

campaigning against the promotion of 'violence-as-normal' in everything from toys to television programmes, its centrepiece has been the drive to end the most common violence of all – the hitting of children by parents or carers for the purposes of chastisement and discipline.

In many countries today this is still a radical idea. Probably a large majority of the world's children are subjected to some degree of physical violence at the hands of their parents or carers (Box 3) and it may be that there are very few societies, past or present, in which this

has not been the case. A mid-1990s survey in the UK, for example, found that 97 per cent of four year-olds were subject to physical punishment, almost half of them more often than once a week.³⁷ Similarly, research in the United States has shown that 94 per cent of three and four year-old children are smacked, spanked or beaten.³⁸

Disturbingly, it appears that such physical punishment often begins at a very early age. Two thirds of mothers in a sample survey in the United Kingdom admitted to smacking before the child's first birthday. According to the same study, about 25 per cent of children were found

Child Maltreatment: a global problem

3

There is clear evidence that child maltreatment is a global problem. It occurs in a variety of forms in every country, whether rich or poor, and is deeply rooted in cultural, economic and social practices.

Throughout the world there were an estimated 57,000 deaths among children under 15 years of age that were attributed to homicide in 2000, according to the World Health Organisation.

The risk of fatal maltreatment for children varies according to the income level of a country and region of the world. For children under five years of age living in high income countries the death rate from maltreatment is estimated at 2.2 per 100,000 for boys and 1.8 per 100,000 for girls. In low to middle income countries the rates are two to three times higher (6.1 per 100,000 for boys and 5.1 per 100,000 for girls). The highest homicide rates for children under five years are found in Africa – 17.9 per 100,000 for boys and 12.7 per 100,000 for girls.

Many child deaths however are not routinely investigated and there is general agreement that fatalities from

child maltreatment are far more frequent than official records suggest in every country.

For example, gender ratios – in particular in East and South Asia – indicate the intentional killing of baby girls in numbers that far exceed those classified as intentional injury in official mortality statistics. According to the latest population census in India, the national female-male sex ratio in the zero to six age group has dropped to 927 girls for every 1000 boys in India as a whole. In the states of Punjab and Haryana the ratio is as low as 793 girls to every 1000 boys. In the face of growing surveillance by local authorities there are reports of increasingly active attempts to disguise infanticide as death by natural causes. For example, by deliberately weakening and dehydrating a new born, by withholding prescribed medicines and by feeding alcohol to cause diarrhoea.

Lawful violence

Hitting children as a form of discipline is common and supported by the law in family homes in almost all countries of the world. Furthermore, it seems that harsh physical punishment by parents is commonplace in those countries for

which data are available. In a survey of children in Egypt, 37 per cent reported being beaten or tied up by their parents and 26 per cent reported injuries such as fractures, loss of consciousness or permanent disability as a result. In Ethiopia, 21 per cent of urban schoolchildren and 64 per cent of rural schoolchildren reported bruises and swellings resulting from parental punishment.

As yet the only countries to have prohibited all violent punishment of children are among the rich nations of the industrialized world. However, there have been various landmark human rights judgements condemning physical punishment of children from constitutional and supreme courts at national level in some of the poorest countries in the world including recently in Namibia, South Africa, Zambia and Zimbabwe. And a significant number of developing countries have moved to end physical punishment in schools and penal systems – for example recently in Ethiopia, South Africa, Thailand, Zambia and Zimbabwe.

Sources: see page x

to be being regularly hit with straps or canes.³⁹ And although the frequency of violence tends to decline with age, a 1995 report by the American Gallup Organisation showed that 40 per cent of American 13 year-olds were regularly hit and that even at age 15 one quarter were still subject to being hit or beaten.⁴⁰

In short, the hitting of children by parents or carers is by a significant margin the most common form of violence in the industrialized world.

Is there then a case for attempting to end a practice which is widely accepted as normal in almost every society, past and present, and is today practised by a clear majority of adults most of whom regard the occasional physical punishment of children as not only normal but necessary?

The arguments against the physical punishment of children boil down to four: that hitting children is a violation of their fundamental human rights; that it can too easily escalate into more severe forms of physical abuse; that even when it does not it may still have consequences for the child's mental and emotional development; and that it makes a significant contribution to a wide range of societies' most intractable problems.

A breach of human rights

Much of what follows will be concerned with what is known and thought about the long term consequences of the physical punishment of children. But it should be said at the outset that many advocates of an end to parental violence feel that no such external justification is necessary.

Physical violence against another person, they would argue, is a breach of that person's human rights and is recognised as such by its illegality in all nations.

Germany: how smacking was banned

4

There is a growing international consensus that the use of any kind of physical violence against children is unacceptable and the number of countries who have implemented an outright ban on physical punishment now stands at seven. The most recent to join the ranks of the converted was Germany where a law was enacted in November 2000.

The new legislation, which is written into the *Bürgerliches Gesetzbuch* (civil law), prohibits not only the physical punishment of children but also psychological harm and other degrading measures. At the same time the *Sozialgesetzbuch No.8* (which covers childcare law) was amended to impose an active duty on local authorities to "promote ways in which families can resolve conflict without resort to force."

While pressure to ban corporal punishment had been growing among certain sectors for some time it was after the general election of 1998 that the new government coalition of the Social Democratic Party and the Green Party included a commitment to legislation in their coalition agreement. Opinion polls showed the majority of Germans still opposed to a ban but, despite this, there was little opposition in either half of the German Parliament.

The expressed objectives of the legal change were to shift public attitudes so that all forms of violence against children might be viewed as

unacceptable in the population as a whole, leading eventually to a break in the cycle of violence. The focus was on providing families with the means to move away from the use of force as a way of resolving conflict – rather than on a punitive approach that would put parents and carers in conflict with the law. The legal change was therefore accompanied by a widespread public education campaign entitled "Mehr Respekt für Kinder" (More Respect for Children). This was initiated by the government but implemented by a combination of federal and local authorities and non-governmental organisations. The campaign employed a wide variety of methods to get the message across including TV slots, the distribution of leaflets and educational materials for parents, public events and workshops and the introduction of structured courses as part of adult education programmes.

An evaluation of the campaign has found that it has so far been successful in raising awareness of violence against children among around 30 per cent of parents and children. There is evidence that the trend among the German public has continued to move away from support for physical punishment and to date there has not been a single prosecution of parents under the new legislation – suggesting that the 'help instead of punishment' approach may be working.

Source: see page x

Why should an exception be made for violence against the most vulnerable members of society?

One by one, the governments of European nations have been persuaded by this argument.

The first to act was Sweden (Box 5) which as long ago as 1957 deleted a legal provision exempting from 'common assault' parents whose use of physical punishment caused minor injuries to their children. Similar amendments – removing legal defences previously

Sweden: a generation without smacking

In 1979 Sweden achieved world-wide fame or notoriety for its decision to ban all forms of corporal punishment of children, including by parents. To the media of some other OECD nations, the new law was an example of 'liberalism gone mad' and of the 'nanny state' intruding ever further into family life.

In Sweden itself, the new law was more calmly received. By and large, it was seen not as a radical change suddenly imposed, but as the next logical step in a long process supported by a clear majority of the Swedish public. When the bill itself finally came before the Riksdag, with all-party backing, it was carried by a majority of 259 for to 6 against.

As far back as 1949 the Riksdag had amended Sweden's Parental Code, substituting 'reprimand' for 'punish'. Ten years later, the Penal Code was also changed, withdrawing parents' exemption from prosecution if injury was caused when chastising children. By 1958, corporal punishment had been banned in all schools and by 1960 in all child care institutions. In 1966 the Penal Code was again amended to withdraw any special right of parents to use violence against children – in effect putting the corporal punishment of children on a par with any other kind of assault.

But following a well-publicised case in the mid 1970s, when a father was acquitted after severely beating his three year-old daughter, it became clear that the existing legislation was inadequate. The result was the anti-smacking law of July 1979 sending out the unambiguous message that *"Children are to be treated with respect for their person and individuality and may not be subjected to physical punishment or other injurious or humiliating*

treatment." Shock waves may have been registered in other countries, but for most Swedes this was a matter of clarifying the law and passing yet another milestone on the journey away from 'legalised violence' in the bringing up of children.

Many observers in other countries also missed the fact that the new law was not a stand-alone measure but the symbolic centrepiece of a public education campaign. A 16-page pamphlet – *"Can you bring up children successfully without spanking and smacking?"* – was sent to all parents with young children (and translated into all immigrant languages). Details of the new law and the reasons behind it appeared on the nation's breakfast tables – printed on milk cartons. Non-violent ways of bringing up children also entered the syllabus in 'responsible parenthood' lessons that are a part of Swedish education at all levels.

25 years on

Extravagant predictions were made by both sides of the international debate on the anti-smacking law. Would it spawn a generation of ill-disciplined and anti-social youth? Or would it yield a new, less aggressive generation and bring about a decline in violence, including child abuse?

Almost a quarter of a century later, it is possible to begin answering some of the questions.

A 1999 evaluation of the Swedish experience for the UK Save the Children Fund, which campaigns against corporal punishment, came to the following conclusions:

- Corporal punishment of children has declined. The percentage of children reporting that they had been 'hit in the last year' has

fallen from just over 50 per cent in 1980 to under 10 per cent in the year 2000.

- Public support for corporal punishment has also declined. A generation ago, 55 per cent of Swedes supported the use of corporal punishment. Today support has fallen to just over 10 per cent (and to only 6 per cent among those under 35).
- Reported child abuse has increased (as it has in other countries, probably reflecting rising awareness rather than rising abuse).
- Among Swedish teenagers brought up since the smacking ban was introduced, drug and alcohol abuse have declined and the proportion of youth becoming involved in crime has fallen by 20 per cent (1975 to 1996).

These results have been challenged, notably by Robert Larzelere of the University of Nebraska Medical Center in the US publication *Families First*. Among other criticisms, Larzelere argues that changes made to the questions asked in periodic surveys of Swedish opinion make it impossible to compare support for corporal punishment today with attitudes in the 1970s.

Larzelere also argues that criminal assault records for 1981 to 1994 show a sharp rise in violence by young people against other young people (though this may reflect changes in prosecuting and recording systems). A year 2000 Swedish government report also says *"we see no tendency to a decrease in bullying at school or in leisure time during the last 20 years."*

In practice, it is all but impossible to find a clear-cut causal connection between Sweden's ban on corporal punishment and any of the social

changes that have occurred in Swedish society since 1979. First, it is always difficult to identify clear social trends when attitudes, definitions, laws, and police and legal practices have also changed over time. Second, it is even more difficult to relate such trends to any one specific change in law or practice; there are simply too many variables involved in shaping children's later life attitudes and behaviours.

Nonetheless, it seems that the worst fears of those who oppose the banning of corporal punishment have not been realised. There has been no obvious degeneration of discipline and socialisation among Sweden's new generation. And although problems with young people continue to exist, the scale and severity of those problems is at a level that most other OECD nations can only aspire to.

Perhaps the verdict to date is best left in the hands of the Swedish people themselves, a clear majority of whom still support the ban almost a quarter of a century after it was first introduced. Meanwhile successive Swedish governments have upheld the 1979 law, arguing that hitting children violates their human rights and that serious child abuse will be difficult to eradicate without making it perfectly clear that violence must not be used in any form in the upbringing of children.

Sources: see page x

available to parents who use physical punishment to chastise children – became law in Finland in 1969, Norway in 1972, and Austria 1977.

By the late 1970's, as the idea of child rights began to gain momentum, the Swedish government decided that a stronger message was needed and so wrote into law that "*Children are to be treated with respect for their person and individuality and may not be subjected to physical punishment or other injurious or humiliating treatment.*" Finland followed four years later, legislating that a child "*shall not be subdued, corporally punished, or otherwise humiliated.*" Towards the end of the 1980s, the Austrian parliament voted an amendment to family law stating that "*using violence and inflicting physical or mental suffering is unlawful.*" In 1994 the government of Cyprus declared illegal "*the exercise of violence on behalf of any member of the family against another member of the family.*" By 1997, the Danish parliament had also amended its Parental Custody and Care Act to stipulate that children "*are to be treated with respect as an individual and may not be subjected to corporal punishment*". In 1998 Latvia prohibited physical punishment, followed in 1999 by Croatia and in 2000 by Germany where the Bundestag amended the law to state that "*Children have a right to a non-violent upbringing. Corporal punishment, psychological injuries and other humiliating measures are prohibited.*" (Box 4). Most recently, in March 2003, Iceland joined the list by passing a new Children's Act outlawing the physical punishment of children.

Figure 13 summarises the present legal status of physical punishment in all OECD countries for which information is available. Overall, it shows that only seven of those countries – Austria, Denmark, Finland, Germany, Iceland, Norway and Sweden – currently have

laws *explicitly* prohibiting physical punishment. In the United States, laws relating to physical punishment are a matter for individual States but so far only one State – Minnesota – has legislation which could be interpreted as a ban on the physical punishment of children.⁴¹ All OECD countries have banned the use of physical punishment within the justice system. All except Australia, Canada, Mexico and the United States have made physical punishment illegal in all schools.

This process of attempting to create a culture of non-violence around children has in recent years been boosted by the UN Convention on the Rights of the Child, now ratified by every nation in the world except Somalia and the United States. Article 19 of the Convention requires all countries to protect children against "*all forms of physical and mental violence ... while in the care of parent(s), legal guardians(s) or any other person who has the care of the child.*"

But it should also be noted that it is the spirit of the Convention as a whole, and not its specific Articles, that seeks to condemn to history the notion that children may be subjected to physical violence in the name of socialisation and discipline. The Convention establishes the positive rights of children to express their opinions, to participate in decisions as and when they are able, and to grow towards maturity in an atmosphere of mutual trust and respect – rights which are unlikely to flourish in a climate that is constantly darkened by the threat of physical punishment.

Gradually, then, the human rights argument is gaining ground across the industrialized world and its international institutions. A recent ruling by the European Court of Human Rights, for example, found that the beating of a British child by his stepfather was a

Figure 13 Physical punishment of children – the legislation record

The table shows whether or not national legislation has been enacted concerning the physical punishment of children. Column 1 identifies countries that have introduced, in civil law, an explicit ban on the use of physical punishment. Column 2 identifies countries where a specific defence remains in either common law or in statute for parents and others who use physical punishment and shows those countries that have acted to remove such a defence. Columns 3, 4, 5, and 6 identify countries where physical punishment is against the law in the home, in schools, in the penal system and within other types of childcare provision.

	Explicit ban (with date of implementation)	Legal defence for parental "disciplinary" assaults removed	unlawful in home	unlawful in schools	unlawful in penal system	unlawful in other institutions and forms of care
Australia	no	no	no ¹	some ²	yes ³	some ⁴
Austria	Yes (1989)	yes	yes	yes	yes	yes
Belgium	no ⁵	no defence exists	no ⁶	yes	yes	yes
Canada	no	no ⁷	no	some ⁸	yes	some ⁹
Czech Republic	no	no defence exists ¹⁰	no	yes	yes	yes
Denmark	Yes (1997)	yes	yes	yes	yes	yes
Finland	Yes (1984)	yes	yes	yes	yes	yes
France	no	no	no	yes ¹¹	yes	no ¹²
Germany	Yes (2000)	yes	yes	yes	yes	yes
Greece	no	no	no	yes	yes	no ¹³
Hungary	no	no	no	yes	yes	yes
Iceland	Yes (2003)	yes	yes	yes	yes	yes
Ireland	no	no	no ¹⁴	yes	yes	yes
Italy	no	yes ¹⁵	yes ¹⁶	yes	yes	yes
Japan	no	no	no	yes	yes	some ¹⁷
Republic of Korea	no	no defence exists	no ¹⁸	yes	yes	no ¹⁹
Luxembourg	no	no	no	yes	yes	some
Mexico	no	no ²⁰	no ²¹	no	yes	no information available
Netherlands	no	no	no ²²	yes	yes	some ²³
New Zealand	no	no ²⁴	no	yes	yes	yes
Norway	Yes (1987)	yes	yes	yes	yes	yes
Poland	no ²⁵	yes	no ²⁶	yes	yes	yes
Portugal	no	no ²⁷	no	yes	yes	yes
Slovak Republic	no ²⁸	no defence exists ²⁹	no	yes	yes	yes
Spain	no	no	no	yes	yes	yes
Sweden	Yes (1979)	yes	yes	yes	yes	yes
Switzerland	no	yes ³⁰	no ³¹	yes ³²	yes	yes
Turkey	no	in civil law only ³³	no	yes	yes	no ³⁴
United Kingdom	no	no	no	yes	yes	some ³⁵
USA³⁶	no	no	no ³⁷	some ³⁸	yes	some ³⁹

Notes to Figure 13

- 1** In New South Wales, the defence was limited in 2002 to prohibit applying force to a child's head or neck, or to any other part of the body where it is likely to cause harm lasting more than a short period.
- 2** Prohibited only in state schools in Capital Territory, South Australia and Victoria and in all schools in New South Wales and Tasmania.
- 3** Judicial physical punishment abolished in all States and Territories. In penal institutions for children, physical punishment is banned by statute, regulation or policy in all States and Territories, but 'reasonable chastisement' defence could be used.
- 4** Prohibited in day care in all States and Territories by regulation or policy, but the 'reasonable chastisement' defence could be raised by staff (except in New South Wales and possibly Victoria). In residential care institutions and foster-care, physical punishment is prohibited by regulation or policy in some States and Territories; 'reasonable chastisement' defence available (except in New South Wales and possibly Victoria).
- 5** Constitutional amendment in 2000 requires respect for children's physical integrity; not interpreted as prohibition of all physical punishment.
- 6** Although there is no explicit defence, the law is not interpreted as prohibiting all physical punishment by parents.
- 7** A challenge under Canada's Charter of Rights and Freedoms to the defence allowing 'reasonable force' in section 43 of Canada's Criminal Code was heard by the Supreme Court of Canada in June 2003 (Judgement pending). In Quebec, the Civil Code no longer defines a 'right of correction'.
- 8** Prohibited – in state schools only – in the following provinces/territories: British Columbia, Quebec, Nova Scotia, New Brunswick, Yukon, Newfoundland, Prince Edward Island, Northwest Territories and Nunavut.
- 9** Varies in Provinces and Territories. For example, foster-parents are forbidden to use physical punishment in British Columbia, Manitoba and Ontario. Ontario also prohibits physical punishment of children receiving services from a child protection agency or other service provider; legislation prohibits physical punishment in provincially-licensed childcare programmes in British Columbia, Alberta, Saskatchewan, Manitoba, Ontario, Nova Scotia, Prince Edward Island, Newfoundland, Northwest territories, Yukon and Nunavut.
- 10** Law silent but physical punishment by parents tolerated in society.
- 11** A High Court ruling in 1889 allowed a 'right to correction' for teachers, as for parents. In 2000 a judicial ruling stated that physical punishment which is repetitive and not educational is not covered by this right.
- 12** Not specifically prohibited, but serious cases covered by the Criminal Code.
- 13** Not specifically prohibited, but serious cases covered by the Criminal Code.
- 14** But Government is committed to law reform following public education.
- 15** Judgement of Supreme Court in Rome in 1996 stated that physical punishment was not a legitimate means of correction and outlawed all violence in childrearing (Supreme Court of Cassation, 6th Penal Section, 18 March 1996).
- 16** 1996 Supreme Court judgement applies, but this has not as yet been confirmed in legislation.
- 17** Prohibited in day care and residential institutions for children but lawful in foster-care as for parents.
- 18** While there is no legal defence for parental physical punishment, it is traditionally accepted.
- 19** No prohibition of physical punishment in day care centres or foster-care.
- 20** Except that the 'right of correction' provision has been removed from the Civil Code in the Federal Territory.
- 21** But see footnote 20.
- 22** Government is considering reform and has commissioned a study on experience of abolition in other European countries.
- 23** Prohibited in residential care institutions but non-severe physical punishment appears to be lawful in other forms of care.
- 24** But under review by Government since 2002, which is also promoting positive, non-violent discipline.
- 25** The 1997 Constitution states that '... The application of physical punishment shall be prohibited' but it also upholds the right of parents 'to rear their children in accordance with their own convictions' and there is traditional acceptance of parental physical punishment.
- 26** While there is no defence for parental physical punishment, the law is not consistently enforced and respected by the judicial system.
- 27** There is a concept of 'paternal power' under which parents should direct their child's education and the child should be obedient to the parents.
- 28** A recent (2002) amendment to the Penal Code outlaws hitting and other forms of violence which causes physical or mental suffering within close relationships. It does not explicitly prohibit physical punishment.
- 29** Law silent but physical punishment by parents tolerated in society.
- 30** Explicit confirmation of parents' punishment rights was deleted from the Civil Code in 1978, but under Swiss case law, parental authority is interpreted as including a right to correct ('droit de correction'). A Swiss federal judgement ruled that physical punishment can no longer be recognised in customary law by teachers or other persons, but this does not apply to parents.
- 31** Law is silent but parental physical punishment remains common and socially approved.
- 32** Prohibited by federal law in all schools, but certain cantons allow it in certain circumstances.
- 33** An amendment to the Civil Code, implemented in January 2002, removed parents' 'right of correction', but such defences still exist in the Criminal Code.
- 34** Not specifically prohibited, but serious cases covered by the Criminal Code.
- 35** Prohibited in residential institutions and foster-care arranged by local authorities or voluntary organisations. In day care institutions, prohibited by regulations in Wales and Scotland but only by guidance in England and Northern Ireland. Remains lawful in privately-arranged foster care; also lawful for childminders in England to smack children with parents' written permission – but Government has announced this will end in autumn 2003.
- 36** Is a matter for state not federal legislation.
- 37** Except in Minnesota where a series of statutory provisions, read together, suggest that any physical punishment by parents is a prosecutable assault (has not been tested by the courts).
- 38** Prohibited in public schools in 27 states although many large city school districts in other states have banned it; remains lawful in private schools in all states (in 23 states allowing it, many large city school districts have banned it).
- 39** 46 States have banned physical punishment in family day care; 48 in state-regulated day care centres; 43 in state-regulated care institutions; and 44 in state-regulated foster-care.

breach of the boy's human rights and that that the UK government was responsible because its laws (which allow physical punishment within the bounds of 'reasonable chastisement') failed to provide sufficient protection. Similarly, Europe's Social Rights Committee is pushing its 45 member countries to acknowledge that the physical punishment of children is a breach of their human rights, arguing that "*The Committee does not find it acceptable that a society which prohibits any form of physical violence between adults would accept that adults subject children to physical violence*" and adding that "*The Committee considers that Article 17 (of the Convention on the Rights of the Child) requires a prohibition in legislation against any form of violence against children, whether at school, in other institutions, in their home or elsewhere.*"⁴²

Teaching the wrong lesson

In addition to the human rights argument, and the specific spur of the Convention on the Rights of the Child, research on the long term effects of physical punishment is also beginning to build a pragmatic case behind the idea of a culture of non-violence towards children.

First, there is the danger that physical punishment can too easily escalate into more severe forms of abuse.

For most parents, there is a clear line between the kind of violence they would consider to be 'reasonable chastisement' and the kind of violence which they would regard as 'abuse'. But for some parents that line clearly does not hold. And attempts to reinforce the distinction by defining 'reasonable chastisement' can quickly descend into the absurd. The only place to draw a line, argue the opponents of physical punishment, is before violence begins at all; accepting mild violence by the many is bound to result in severe violence by the few.

Such arguments, which have carried the day in many parts of Europe, dissolve the distinction between physical punishment and physical abuse. Both are abuse. And although there may be many different rungs on the abuse ladder, removing the bottom ones makes that ladder more difficult to climb.

Second, there is the argument that the physical punishment of a child by an adult, far from being a necessary means of correction, is in fact a startlingly effective lesson in behaving badly.

Or as the United Kingdom Health Education Authority puts it:

*"If you hit your child you're telling the child that hitting is reasonable behaviour. Children who are treated aggressively by their parents are more likely to be aggressive themselves and to take out their angry feelings on others who are smaller and weaker than they are."*⁴³

Research has tended to confirm this proposition, showing that parents' use of physical punishment is a strong predictor of aggression in adolescence.⁴⁴

Similarly, it appears that children who suffer physical punishment are more likely to bully other children.⁴⁵ And this makes it seem particularly absurd that one of the most frequent reasons given by parents for hitting a child is that the child has hit another child. Certainly it is not difficult to see that from the child's point of view this delivers a less than coherent message: 'it's wrong to hit other people, and to teach me this my mother/father has just slapped me hard on the leg'.

The link between physical punishment and aggressive behaviour is also supported by many of the relevant professional institutions who have examined or commissioned reports on

the issue, such as the British Psychological Society:

"There is now a weight of evidence to show a link between exposure to even minor violence ... and acquisition of violent modes of behaviour."

Or the American Academy of Paediatrics:

"Spanking has been associated with higher rates of physical aggression."

Or the Australian Institute for Criminology:

"... families constitute the training ground for aggression ... The circumstances in which physical punishment is used against children contribute to a learning process ... those children are more likely to develop violent behaviours as they become adults."

In sum, the widespread use of physical punishment in the bringing up of children, it is argued, is a mass lesson in the legitimacy of violence as a method of resolving conflicts or asserting will.

Assessing risk

The indictment of physical punishment does not stop there. Violence against children, even at levels that most parents would not judge to be abuse, has also been accused of jeopardising a child's normal mental and emotional development and of promoting a wide range of later-life problems. The detailed charge sheet includes: reduced self-control; depression and mental ill-health; erosion of the parent child relationship; inability to internalise the values of parents and society; delinquency and criminality; drug and alcohol abuse; a propensity to partner-violence; and a diminished capacity for empathy with others. All this adds up to what Murray Strauss, a researcher into the physical punishment of children and one of the leading advocates of its abolition, has

Welfare reform and child abuse

6

Although the reform of welfare systems is much-discussed in OECD countries, very little is heard about the possible effects on child abuse. Yet there is a mass of evidence to suggest that the prevalence of child maltreatment may be highly sensitive to changes in economic circumstance. The US study cited below, for example, has shown that an increase from 10 per cent to 15 per cent in the proportion of children living in extreme poverty is associated with a 22 per cent increase in child abuse.

In recent years, it has been the United States that has travelled furthest down the road of welfare reform. And it is also in the United States that the possible links between benefits changes and child abuse have been most closely investigated.

Researchers Christina Paxson and Jane Waldfogel, respectively of Princeton and Columbia Universities, were prompted to look into the issue by the fact that about half of all cases investigated by US Child Protection Services (CPS) involve families on welfare. In the State of Illinois, for example, children living in families receiving or recently receiving state benefits account for about 15 per cent of the child population – and 60 per

cent of cases referred to the CPS. Given these facts, they argued, it would be surprising if levels of child maltreatment were not affected by welfare reforms.

Paxson and Waldfogel's 2002 study – *Work, welfare, and child maltreatment* – is at pains to point out that when analysing the relationship between labour market patterns, family structure, and child maltreatment, correlation should not be equated with cause:

"An emotionally unstable mother may be less likely to work, less likely to live with her child's father, and more likely to abuse or neglect her child. A finding that unemployment or single parenthood is positively related to maltreatment does not provide information on the underlying mechanisms that drive the relationship."

The two researchers nonetheless conclude that increases in different measures of child maltreatment can be related to:

- Increases in the number of families with absent fathers and working mothers.
- Increases in the number of families with two non-working parents.

- Increases in the number of families with incomes less than 75 per cent of the national poverty line.

In a second paper – *Welfare reforms, family resources, and child maltreatment* – Paxson and Waldfogel extend their analysis by linking data on welfare reforms with data on maltreatment cases and children in foster care over the period 1990 to 1998. They find that when state welfare benefits are lower, more children are substantiated as victims of neglect and more children are in foster care. They also find evidence that some welfare reform policies are associated with increased numbers of children in foster care.

Many issues remain opaque. But Paxson and Waldfogel's work nonetheless sends a message to all OECD governments contemplating or engaged in the process of welfare reform. The well-being of children, and in particular the likelihood of abuse and neglect, may be intimately related to changes in welfare and benefits systems.

described as *"one of the best kept secrets of American child psychology."*

Such links between physical punishment and later-life behaviours and problems are today some of the most intensively researched and debated areas in the whole literature of child-rearing. But the research often finds it extremely difficult to steer clear of the rocks and whirlpools which threaten to invalidate or misrepresent its findings.

First, it is extremely difficult to establish unambiguous cause-and-effect linkages

between any one aspect of child-rearing and any given outcome in later-life. The number of influences and variables involved in shaping the attitudes and behaviour of children is obviously enormous, and this alone would make it difficult enough to isolate the long-term effects of any one factor. But in the case of the physical punishment of children the 'factor' itself is also difficult to define. Should research look for the likely long-term consequences of only severe and regular physical punishment, or should it include physical punishment that is light and infrequent? Unwillingness to draw a

distinction between the two on the grounds discussed earlier – that all hitting of children is abuse and that the only effective line is between violence and non-violence – has sometimes left research findings looking ridiculous. Links between regular and severe abuse as a child and, say, depression or aggression in later life does not prove that all physical punishment is likely to produce the same result.

Second, physical punishment is an issue of which most people have some experience, on which most people have

Italy: Ippolito's law

In 1995, not far from Lake Como near Italy's border with Switzerland, a Magistrate's court found a local man, Natalino Cambria, guilty of 'abusing the means of correction'. The man's daughter, Danila, had been repeatedly hit and kicked for getting poor grades at school, lying, and failing to live up to her father's expectations.

In November of that year, the Milan Court of Appeal heard the case and found Cambria guilty of 'ill-treatment'.

By 1996 the case was in Italy's Supreme Court, where Cambria's lawyers argued that he should not have been convicted of either offence. The beatings had been administered, they argued, without any intention of ill-treatment or causing physical or mental damage; Cambria had been merely exercising his right and duty to correct his daughter's behaviour.

Delivering the Supreme Court's ruling, Judge Francesco Ippolito wrote an opinion which has since become a landmark judgement in Italian law.

Rejecting the lawyers' arguments, Ippolito upheld Cambria's conviction for ill-treatment of his daughter under Article 572 of the Italian Penal Code. But the wider significance of the ruling lay not in the confirmation of the ill-treatment charge but in the dismissal of the earlier conviction for 'abuse of the means of correction'. The relevant article of the Penal Code, went the opinion, could only be triggered when a *legitimate means of correction* was used abusively. Corporal punishment regardless of how it is used, Judge Ippolito ruled, could not be considered a legitimate means of correction.

Italy has not yet formally joined the small group of European nations that

have introduced new legislation specifically outlawing the use of corporal punishment. But in practice Italy's lower courts rarely stray from the decisions of the Supreme Court Justices. And in practice, Judge Ippolito's ruling is now regarded as the law of the land.

Ippolito himself left no room for doubt that this had been the intention, describing the Cambria case as "an opportunity to establish the legal principle that parents in Italy are absolutely forbidden from using any violence or corporal punishment to correct their children's conduct." As Italy itself has moved away from Fascism, he noted, so it must also move away from the concept of the authoritarian father. As a further illustration of this shift, he referred to a Supreme Court decision of the 1950s barring husbands from 'correcting' their wives by physical or any other means.

The ruling also drew support from international treaties and Conventions to which Italy is party. In particular, the Supreme Court Justices referred to the UN Convention on the Rights of the Child, citing the pre-amble and Articles 2, 3, 18, and 19 – the last of which specifically prohibits the use of violence against children.

There is a long way to go before the spirit of the ruling is universally observed in Italy. But Judge Ippolito has predicted that the judgement will 'filter into society' to create an atmosphere in which the physical punishment of children will no longer be regarded as socially acceptable.

Soures: see page x

opinions, and in which the media has an intense interest. Research which is either presented or misrepresented in such a way as to suggest that smacking children is the cause of all problems from delinquency to depression are always likely to attract headlines and editorial derision.

As Penelope Leach, Senior Research Fellow at London's Royal Free and University College Medical School and an anti-physical punishment campaigner has written:

"Concepts such as statistical significance, correlation, prediction or risk are difficult to present comprehensibly in the brief and simple terms demanded by the media ... It is difficult to explain, briefly, that no single variable such as physical punishment would be expected to account for all the variance in the outcomes of upbringing; that nobody is suggesting that every smack leads to anti-social behaviour any more than every cigarette leads to lung cancer, or even that everybody who is beaten a great deal is certain to show later ill effects any more than everybody who smokes a great deal is certain to get lung disease. The relevant concept is risk, and explaining risk is part of government's role."

This debate on the physical punishment of children is characterised by strong passions on both sides, with much of the heat arising from the debate on the pragmatic issue of its possible long term effects on children and on their societies. But in the depths of that debate, the human rights argument should be remembered. As opponents of physical punishment argue, it is but a few decades since today's industrialized societies were debating whether or not men should continue to have the right to beat their wives – a debate that was resolved without the need for decades of painstaking proofs that wife-beating was linked with an increased risk of adverse long-term consequences.

The United Nations Committee on the Rights of the Child has no doubts on the issue. It has called on all governments to prohibit all forms of physical punishment, including within the family, the education system, child care institutions, and the judicial system. “Violence against children,” says the Committee, “is unacceptable under any circumstances.”⁴⁶ The position of UNICEF and its Executive Director Carol Bellamy is equally unambiguous: – “disciplining children in this way is incompatible with the Convention on the Rights of the Child.”⁴⁷ UNICEF, along with UNESCO, the UN High

Commissioner for Human Rights, and many other national and international bodies, now supports the Global Initiative to End All Corporal Punishment of Children.⁴⁸

These arguments, and these statements from respected international organisations, have already provoked hostile reactions in some parts of the media. But they are also provoking thought among parents and those responsible for the care of children in all countries. And although it is a long way from the statistics of child deaths with which this report began to what

happens in the homes of millions of well loved and well cared for children, the link between them is that one of the steps towards preventing or reducing child abuse and neglect is the creation of an insurmountable barrier of cultural and social pressure between adult problems and children’s suffering. And that is a challenge not only to researchers and child protection agencies but to all who have any involvement with children or who play any part in creating the climate of public and political opinion which ultimately governs what is and what is not acceptable in adult behaviour. ■

Notes

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Sources

Figures 1a, 1b, 2, 5, 6, 7, 8a and **8b** are based on analysis of the World Health Organization (WHO) Mortality Database (information on how to access these data is given at <http://www.who.int/whosis/mort>). The WHO Mortality Database includes data reported by WHO member states on numbers of deaths by cause (based on the International Classification of Diseases, Injuries and Causes of Death) and population totals. The analysis of the data for this Report Card uses information on deaths from assault (homicide and injury purposely inflicted by other persons) and other violence, which includes events of undetermined intent (injury undetermined whether accidentally or purposely inflicted – except in **Figure 1a**), injury resulting from legal intervention and operations of war, and sequelae of the above.

In order to allow for differences among countries in the distribution of the 0 to 14 population among 4 age groups (below 1, 1 to 4, 5 to 9 and 10 to 14 year-olds), the rate for all children under the age of 15 years is based on the mortality rates calculated for each country separately for each age group and then weighted with a common set of weights reflecting a standard OECD population excluding Turkey (shares of 6, 26, 33 and 34 for each of the 4 age groups respectively). On the other hand data for those aged 15 years and over have not been age-standardized (**Figure 6**).

Data refer to 1995-99 except for Australia, Finland, France, Greece, New Zealand, Spain, USA (1994-98); Canada, Ireland, Italy, Japan, Korea, Norway (1993-97); Denmark, Iceland, Poland, Sweden, Switzerland (1992-96); Belgium and Mexico (1991-95). The five-year death rates for each age group were calculated by dividing the sum of deaths across the five years by the sum of the population in each year multiplied by 100,000.

Different countries used different WHO coding systems at different times. Therefore the data are drawn from three different databases depending on country and year as follows:

ICD-10: X85-Y09 assault, of which Y06 is neglect and abandonment, (G101 for Switzerland), Y10-Y34 undetermined intent, Y35-Y36 legal intervention & operations of war, Y87, Y89 sequelae of above (G102 for Switzerland). Czech Republic, Slovak Republic, Hungary, Netherlands years 2 to 5, Denmark, Finland, Japan, Korea, years 3 to 5, Germany, Luxembourg, Norway, Switzerland years 4 to 5, Australia, Iceland year 5 in the 1990s;

ICD-8: A148 homicide & legal intervention, A149 undetermined intent, A150 operations of war. Denmark years 1 to 2, Switzerland years 1 to 3 in the 1990s; all countries in 1970-75;

ICD-9: B55 homicide, B560 undetermined intent, B561 operations of war, B569 other: legal & sequelae all the rest.

Data for Turkey are missing from the WHO mortality database and information on Turkey is therefore included only in **Figure 13**.

Luxembourg and Iceland were excluded from the analysis in the Report Card (except in **Figure 2, Figure 8** and **Figure 13**) because of their small populations and numbers of child maltreatment deaths.

Data in **Figure 1b** are rounded rates of those deaths that are classified as being from maltreatment and those that are classified as being 'of undetermined intent' (see above). Deaths from maltreatment are as in **Figure 1a**. The rates (to one decimal point) of deaths from 'undetermined intent' are as follows: Spain: 0.0, Greece: 0.0, Italy: 0.1, Ireland: 0.1, Norway: 0.0, Netherlands: 0.1, Sweden: 0.1, Korea: 0.2, Australia: 0.1, Germany: 0.2, Denmark: 0.2, Finland: 0.2, Poland: 0.4, UK: 0.5, Switzerland: 0.1, Canada: 0.2, Austria: 0.0, Japan: 0.3, Slovak Republic: 0.5, Belgium: 0.5, Czech Republic: 0.7, New Zealand: 0.1, Hungary: 0.2, France: 0.9, USA: 0.3, Mexico: 0.8, Portugal: 3.3.

Figure 3 is based on data from the US Department of Health and Human Services, Administration for Children and Families, *Child Maltreatment 2000*, Washington, DC, 2002 (available from <http://www.acf.hhs.gov/programs/cb/publications/cmreports.htm>) and refer to child abuse reports to official agencies. Children younger than a year accounted for 43.7 per cent of the fatalities

among all children under the age of 18, and 85.1 per cent were younger than 6 years of age.

Data in **Figure 4** are calculated on the basis of information from N. Trocmé, B. MacLaurin, B. Fallon, J. Daciuk, D. Billingsley, M. Tourigny, M. Mayer, J. Wright, K. Barter, G. Burford, J. Hornick, R. Sullivan and B. McKenzie, *Canadian Incidence Study of Reported Child Abuse and Neglect: Final Report*, Minister of Public Works and Government Services Canada, Ottawa, Ontario 2001 (available from <http://www.hc-sc.gc.ca/pphb-dgspsp/publicat/cisfr-ecirf/index.html>) and refer to child abuse reports to official agencies. Data refer only to substantiated cases. Cases are recorded as 'substantiated' if the balance of evidence indicates that abuse or neglect has occurred. The graph presents the percentage of perpetrators of physical child abuse by their relation to the child victim. Multiple perpetrators were double-counted (about 5 per cent of cases). Since there was no statistically significant substantiation rate for foster families available, calculations for this group are based on the substantiation rate for all kinds of child maltreatment together. Cases were classified as physical abuse if the investigated child was suspected to have suffered or to be at substantial risk of suffering physical harm at the hands of his or her alleged perpetrator. Perpetrator refers to the person or persons who were confirmed to have maltreated the child and who were relatives.

Data in the second column of **Figure 7** are from the report *Child injuries in industrialized countries* written in 2000 by the London School of Hygiene and Tropical Medicine (LSHTM) for the UNICEF Innocenti Research Centre as a contribution to 'A league table of child deaths by injury in rich nations', *UNICEF Innocenti Report Card No.2*, February 2001 (available at <http://www.lshtm.ac.uk/ecohost/publicns-2000.htm>).

Data for **Figure 9** on children in child protection substantiations (notifications of abuse where it is concluded after investigation by the community services department that the child has been, is being or is likely to be abused) refer to fiscal year 1999-00 and are from: Australian Institute of Health and Welfare, *Child protection Australia 1999-00*, pp.46-47, AIHW cat.no. CWS 13, Canberra 2001 (available at <http://www.aihw.gov.au/publications/cws/cpa99-00/cpa99-00.pdf>). Proportion of physical abuse cases has been imputed from the proportion among all children aged up to age 17. Cases of sexual abuse, emotional abuse and neglect have not been included. Data on deaths are as in Figure 2 (taking the average of the 5 years).

Survey data in **Figure 10** are from C. Pfeifer, P. Wetzels and D. Enzmann, *Innerfamiliäre Gewalt gegen Kinder und Jugendliche und ihre Auswirkung*, Kriminologisches Forschungsinstitut Niedersachsen e.V., Hannover, 1999 (available from

<http://www.kfn.de/fb80.pdf>). Data are based on more than 14,000 9th and 10th graders (mainly 15 to 16 year-olds) living in nine German cities (Kiel, Hamburg, Hanover, Wunstorff, Lilienthal, Leipzig, Stuttgart, Schwäbisch Gmünd and München) in 1998. Data of the nine German cities were pooled. The response rate of all pupils who were in school at the date of the survey was 95.1 per cent. Of the total sample 84.7 per cent of adolescents experienced physical child abuse never or only rarely, 8.1 per cent experienced some physical abuse, 4.6 per cent experienced severe physical abuse sometimes and 2.6 per cent experienced severe physical abuse often. 86.3 per cent of all adolescents never witnessed domestic violence, 7 per cent were witnesses sometimes and 6.7 per cent of adolescents witnessed intimate partner violence often.

Data in **Figure 11a** and **12** are from A. Sedlak and D. Broadhurst, *Third National Incidence Study of Child Abuse and Neglect*, U.S. Department of Health and Human Services, Washington, DC, 1996 and refer to cases of child abuse known to Child Protective Services in the US. Acts constituting physical abuse include hitting with a hand, stick, strap, or other object; punching, kicking, shaking, throwing, burning, stabbing, or choking a child. Data refer only to those children that have suffered demonstrable moderate harm as a result of the maltreatment by a parent or parent-substitute (so called Harm Standard).

Data in **Figure 11b** is calculated by dividing the share of substantiated cases of physical child abuse in respective families by the share of these family types in the whole population. Shares of substantiated cases of physical child abuse by family types for Canada are calculated on the basis of data from N. Trocmé, B. MacLaurin, B. Fallon, J. Daciuk, D. Billingsley, M. Tourigny, M. Mayer, J. Wright, K. Barter, G. Burford, J. Hornick, R. Sullivan and B. McKenzie, *Canadian Incidence Study of Reported Child Abuse and Neglect: Final Report*, Minister of Public Works and Government Services Canada, Ottawa, Ontario, 2001 (available from <http://www.hc-sc.gc.ca/pphb-dgspsp/publicat/cisfr-ecirf/index.html>). Shares of substantiated cases of physical child maltreatment for Australia are from A. Broadbent and R. Bentley, 'Child abuse and neglect Australia 1995-96', Australian Institute of Health and Welfare, Canberra, Child Welfare Series No. 17, 1997 (available from <http://www.aihw.gov.au/publications/welfare/cana95-6/>). Shares of family types in Canada and Australia derive from J. Bradshaw and N. Finch, 'A comparison of Child Benefit packages in 22 countries', Department of Work and Pensions, The Charlesworth Group: Huddersfield, Research Report 174, 2002.

Figure 13 was compiled on the basis of information collected by Peter Newell (Joint Co-ordinator) and Dr Sharon Rustemier (Research Assistant) of the Global

Initiative to End All Corporal Punishment of Children (www.endcorporalpunishment.org) from governments, non-governmental organizations, national human rights and academic institutions in 26 nations. Reports submitted by many of these nations under the UN Convention on the Rights of the Child and documents relating to their examination by the Committee on the Rights of the Child were also analysed, together with relevant articles in specialist journals.

Box 1

Measuring maltreatment: the data sources

Calculations for the comparison of estimates of physical maltreatment in the UK are based on survey data drawn from P. Cawson, C. Wattam, S. Brooker, G. Kelly, 'Child maltreatment in the United Kingdom, a study of the prevalence of child abuse and neglect', National Society for the Prevention of Cruelty to Children, London, 2000 and official data drawn from Children and Young People on Child Protection Registers, Year Ending 31 March 2001, the UK Department of Health, 2001 available at <http://www.doh.gov.uk/public/cpr2001/cpr2001.pdf>

Box 2

Colorado counts the cost

Calculations of cost are based on an analysis conducted by M. Gould and T. O'Brien, 'Child maltreatment in Colorado: the value of prevention and the cost of failure to prevent', Colorado Children's Trust Fund, Denver, USA, 1995.

Box 3

Poorer nations: poor children

Data on regional mortality rates from maltreatment are taken from the WHO 'World Report on Violence and Health', 2002. These figures do not include deaths that have been classified as being of 'undetermined intent'. Discussion of the birth sex ratios in India and the practice of female infanticide can be found in Aravamudan, 'Born to Die,' an article published on October 24, 2001 by India's online news service at www.rediff.com/news/2001/oct/24spec.htm. See also Mahendra K. Premi, 'The Missing Girl Child', in *Economic and Political Weekly*, May 26, 2001 where further references are found. The survey on the use of physical punishment of children in Egypt is reported in R. Youssef, M. Attia and M. Kamel, 'Children experiencing parental use of corporal punishment', *Child Abuse and Neglect*, 1998, Volume 22:959-973. Information on Ethiopia is from M. Ellesberg et al., 'Researching domestic violence against women: methodological and ethical considerations', *Studies in Family Planning*, 2001, 32:1-16.

Box 4

Germany: how smacking was banned

This draws on a summary of a study tour of Germany undertaken by Phil Taverner, Area Children's Services Manager for the National Society for the Prevention of Cruelty to Children for Hampshire, Berkshire and the Isle of Wight in co-operation with the UK 'Children are Unbeatable Alliance'.

Box 5

Sweden: a generation without smacking

Results from the 1999 evaluation of the Swedish experience are drawn from J. Durrant, 'A Generation without Smacking: The Impact of Sweden's ban on physical Punishment', Save the Children Fund, United Kingdom, 2000. Robert Larzelere challenges the results in R. Larzelere, 'Sweden: data does not support success claims', *Families First*, Issue 2, Autumn 2001.

The Swedish government report is by S. Janson, 'Children and abuse – corporal punishment and other forms of child abuse in Sweden at the end of the second millennium', 2002, a report prepared for the Committee on Child Abuse and Related Issues, Ministry of Health and Social Affairs, Sweden. English summary is available at http://social.regeringen.se/pressinfo/pdf/barn/childabuse_2002.pdf

Box 6

Welfare reform and child abuse

This discussion draws on C. Paxson and J. Waldfogel, 'Work, welfare, and child maltreatment', *Journal of Labor Economics*, Volume 20, No. 3, 2002 (pp. 435-474) and C. Paxson and J. Waldfogel, 'Welfare reforms, family resources, and child maltreatment', *Journal of Policy Analysis and Management*, Volume 22, No. 1, 2003 (pp. 85-113).

Box 7

Italy: Ippolito's law

This is largely drawn from S. Bitensky, 'Spare the rod, embrace our humanity: towards a new legal regime prohibiting corporal punishment of children', University of Michigan Law School, 1998 (pp. 380-386).

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